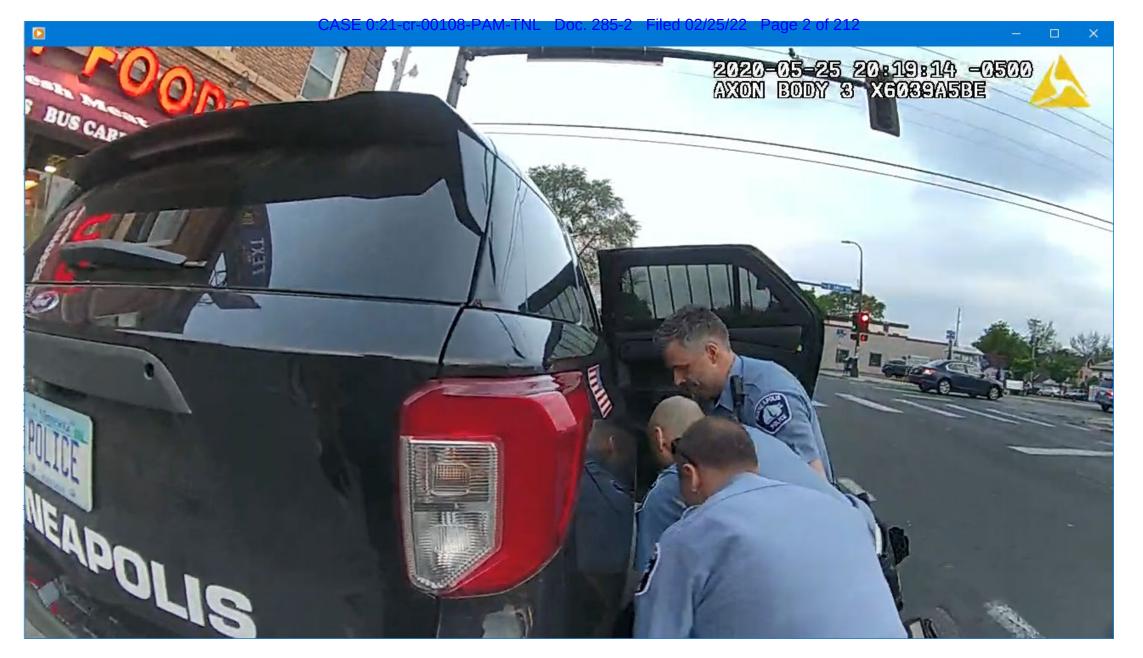
Count 2 2(b). Def Thao knew unreasonable force was being used



Def Thao knew unreasonable force was being used: GE 9 at 20:19:14



Thao knew unreasonable force was being used: GE 27 at 20:19:14.



	TT	What are you- what are you on?
20:21:53	GF	I can't breathe! Please, the knee on my neck. I can't breathe shit. Uh ah.
(5:15)		

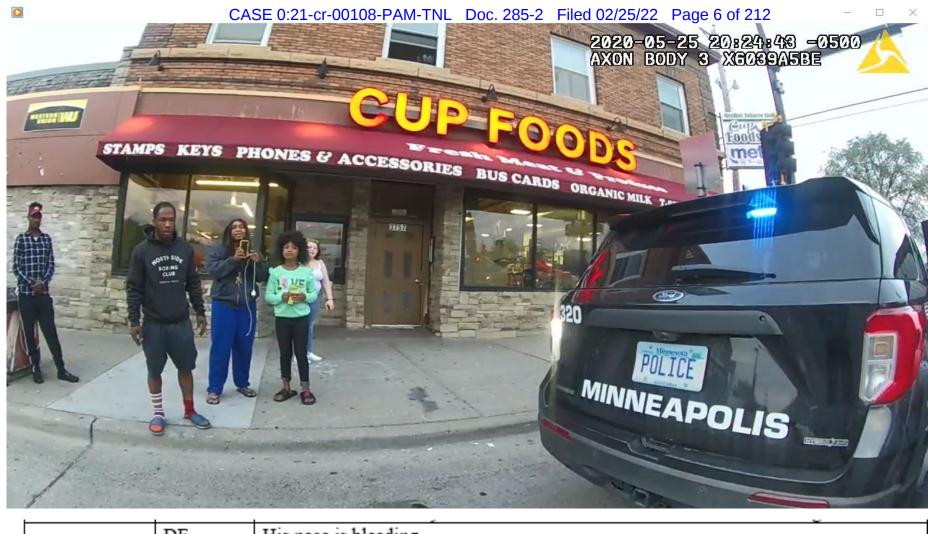
Thao knew unreasonable force was being used: GE 9 & GE 9A at 20:21:53.

	DW	That's some burn ass shit bro.
	GF	Ah ha ah.
	TT	Okay. [OV]
	DW	That's some burn ass shit. Ya'll know that is. [OV]
	TT	Okay.
20:23:33 (6:55)	DW	You don't gotta sit there with your knee on his neck bro.
(0.55)	GF	Uh uh.
	TT	He's talking he's fine.
	DW	Bro he ain't fine man.
	GF	Uh. Please. Sir.
	TT	Okay alri- we're done.
	DW	You [UI] in a jujitsu move bro?
	TT	We're done.
	DW	You tr'-you trappin his breathing right there bro. [OV]
20:23:43	TT	We're done. Okay. Okay. [OV]

2020-05-25 20:28:30 -0500 AXON BODY 8 X6039A5BE S & ACCESSORIES BUS CARDS ORGANIC MILK TO MINNEAPOLIS

Filed 02/25/22 Page 5 of 212

Thao knew unreasonable force was being used: GE 9 & 9A at 20:23:30 (Stopping Breathing).



	DF	His nose is bleeding.
20:24:44 (08:06)	AF	He's about to pass out.
	TT	That's what happens layin' on the ground.

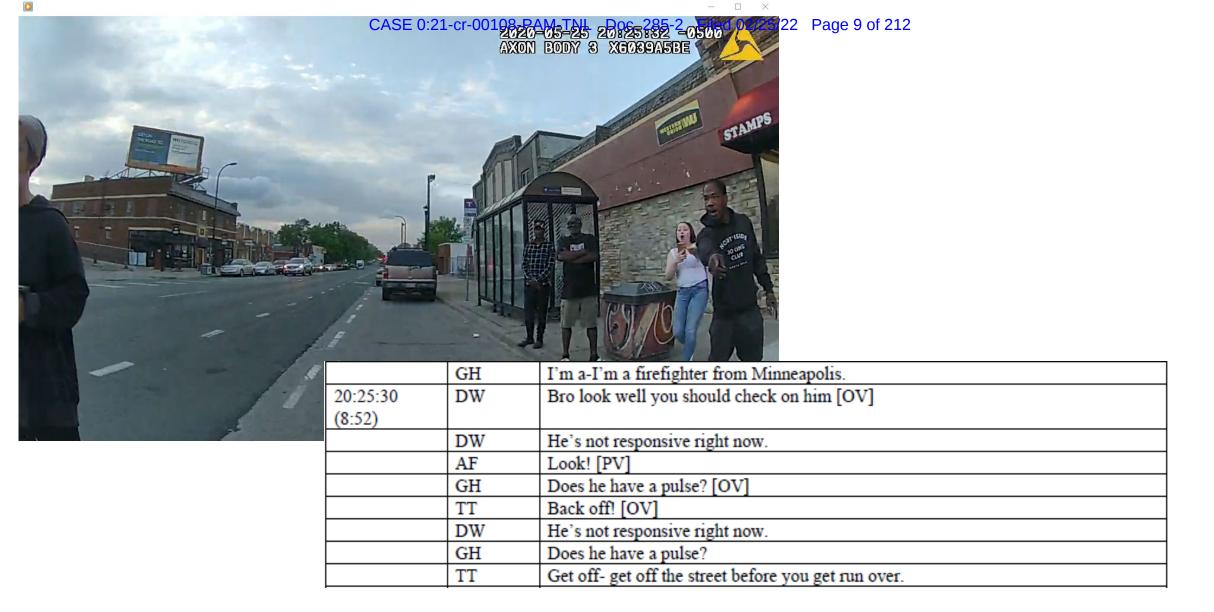
Thao knew unreasonable force was being used: GE 9 & 9A at 20:24:42 (Lost Consciousness).



Thao knew unreasonable force was being used: GE 27 at 20:25:05.



Thao knew unreasonable force was being used: GE 9 at 20:25:21.



Thao knew unreasonable force was being used: GE 9 & 9A at 20:25:30 (Lost Consciousness) (Clip from 20:25:25 – 20:25:40)

20:25:42	DW	He's not responsive right now bro.	
(9:04)			
	GH	I'm watching. Does he have a pulse?	
	DW	No bro look at him he's not responsive right now. [OV]	
	GH	Check- check him for a pulse. Please. [OV]	
20:25:48	TT	Okay. We have an ambulance coming. [OV]	
(9:10)			
	GH	Check for a pulse. [OV]	
	DW	Bro, bro are you serious? You gonna just let him sit there with that on his neck.	
	AF	[UI]	
	GH	Check for a pulse. [OV]	
20:25:51	GH	Let me see a pulse!	
(9:13)			
	DW	Is he breathing right now? [OV]	
	AF	He's handcuffed! [OV]	
	DW	Check his pulse!	
20:25:56 (9:18)	TT	Alright [UI]. How long are we gonna have this conversation?	
	DW	Check his pulse!	
	TT	Okay.	
20:25:57	DW	Check his pulse, Thao.	
(9:19)			
	GH	I'm telling you right now check his pulse [OV]	
	TT	Alright.	
	DW	Thao, check his pulse bro.	
	TT	Yeah? Okay.	
	DW	Thao, check his pulse, bro.	



Thao knew unreasonable force was being used: GE 9 & 9A at 20:25:42 (Check for Pulse!) (Clip from 20:25:35 – 20:25:55)

	DW	Check his pulse! CASE 0:21-cr-00108-PAM-TNL Doc.
20:25:56	TT	Alright [UI]. How long are we gonna have this conversation?
(9:18)		
	DW	Check his pulse!
	TT	Okay.
20:25:57 (9:19)	DW	Check his pulse, Thao.
	GH	I'm telling you right now check his pulse [OV]
	TT	Alright.
	DW	Thao, check his pulse bro.
	TT	Yeah? Okay.
	DW	Thao, check his pulse, bro.
	DF	Look at this dude.
	TT	Just we've got EMS coming. Alright.
	DW	Bro, check his pulse, bro. Bro, check his pulse. You bogus bro. You bogus. [C
20:26:04 (9:26)	TT	Don't—don't do drugs guys.
	DW	Don't do drugs bro?
	TT	Exactly.
	DW	What is that?!
	GH	Check his pulse right now. [OV]
20:26:07	DW	What do you think that is?!
(9:29)		
	TT	Olean Olean
20.26.00		Okay. Okay.
20:26:09 (9:31)	DW	So you call what he doin' okay?

Filed 02/25/22 Page 11 of 212

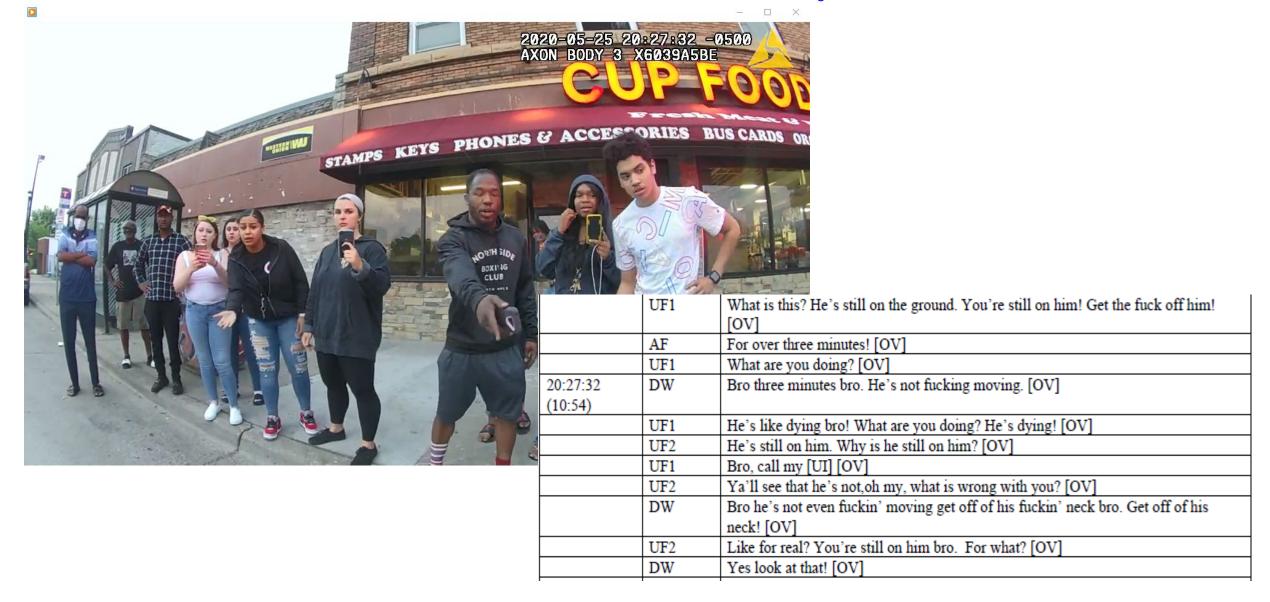


Thao knew unreasonable force was being used: GE 9 & 9A at 20:25:42 (Check for Pulse!) (Clip from 20:25:50 – 20:26:10)

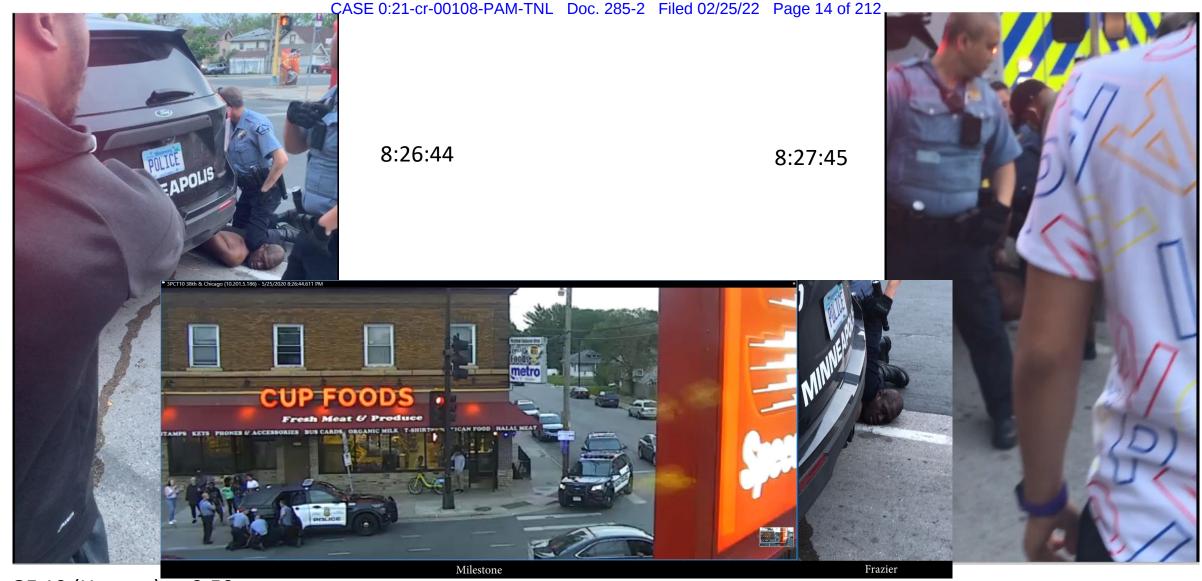


	GH	Do you have a pulse? [OV]
	DW	Bro you just got back out here bro. Bro you just got back out here bro. [OV]
	UM1	[vibrating noise] I've been watchin' it the whole time [U]I
20:27:08	TT	I'm busy tryin' to deal with you guy right now.
(10:30)		
	GH	Okay, do they have pulse? [OV]

Thao knew unreasonable force was being used: GE 9 & 9A at 20:27:05-10 (Clip from 20:27:05 – 20:27:10) (Interacted with Bystanders – "Do THEY have a pulse?!")



Thao knew unreasonable force was being used: GE 9 & 9A at 20:27:18 – 20:27:45 (Stopping Breathing).



GE 19 (Hanson) at 2:59

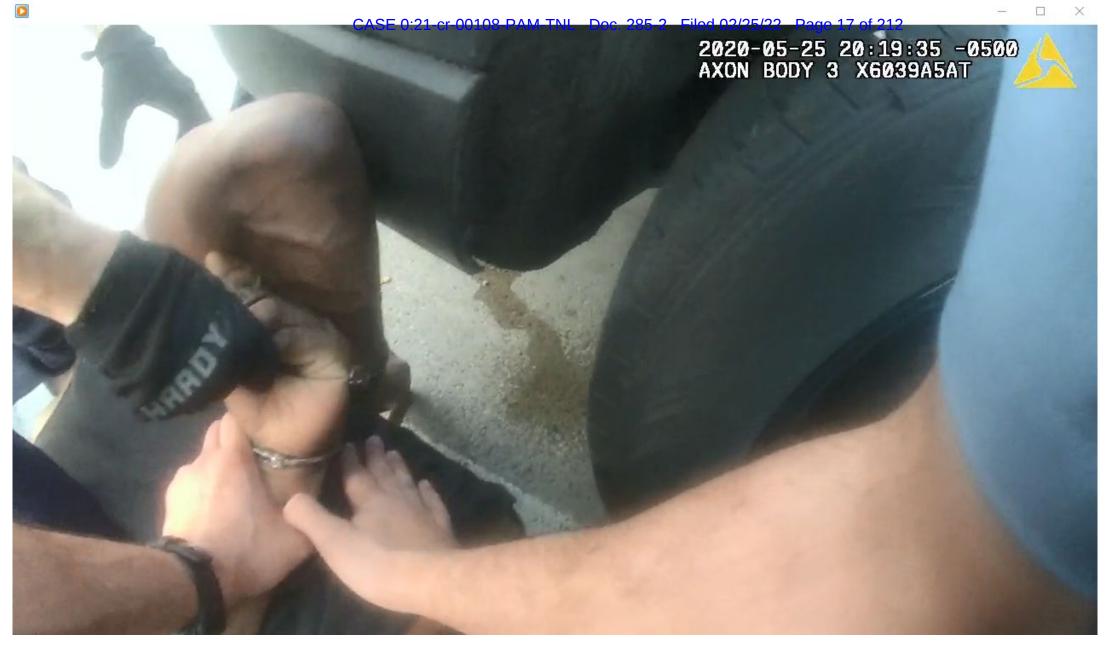
GE 20 (Funari) at 1:52

Thao knew unreasonable force was being used: GE 21 at 20:26:44; GE 19 at 2:59; GE 20 at 1:52

Count 2 2(b) Def Kueng knew unreasonable force was being used



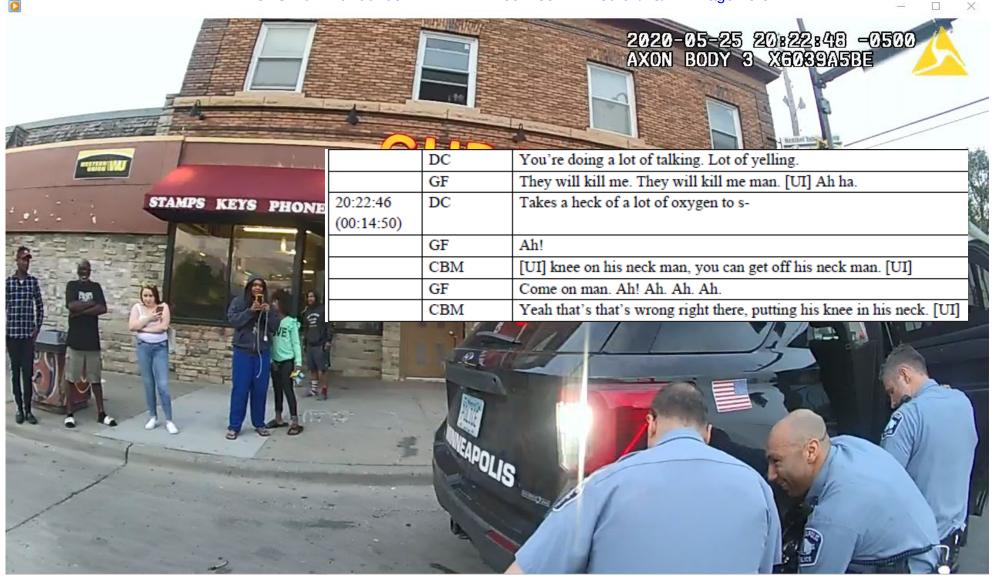
Def Kueng knew unreasonable force was being used: GE 7 at 20:19:17 (Seconds after Chauvin starts restraint and JK still reaching for [and ostensibly looking down at] hands only inches from neck restraint)



Kueng knew unreasonable force was being used: GE 7 at 20:19:35 (Helping to hold down GF and full perspective of neck restraint)

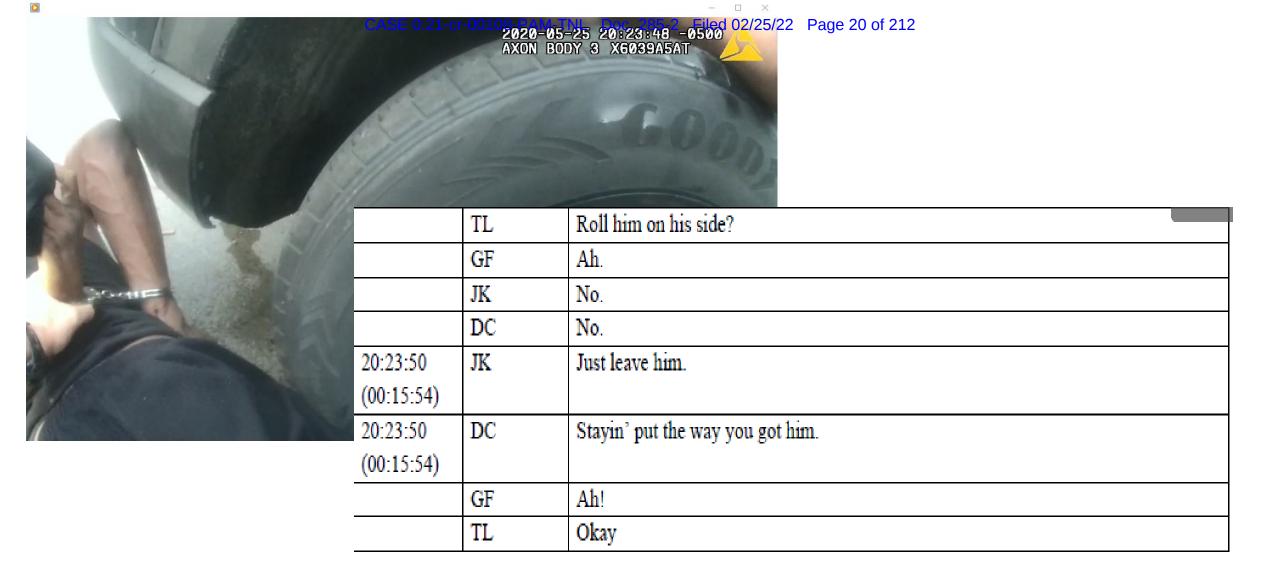


Kueng knew unreasonable force was being used: GE 7 at 20:22:00 (Helping to hold down GF; full perspective of neck restraint; GF has just told TT he can't breathe, referencing the knee on his neck)



Kueng knew unreasonable force was being used: GE 9 & 7A at 20:24:39 - 48

CLIP GE 9: 20:22:35 - 20:22:48



Kueng knew unreasonable force was being used: GE 7 & 7A at 20:23:48 (TL 1st Roll him on his side – DC & JK say "No.").





20:24:44	AF	He's about to pass out.
(00:16:47)		
	TL	Yeah I think he's passing out. [radio]
	DW	He's fuckin' stopping his breathing right now bro. You think that's cool?
	GF	[soft groan] [radio – continues for several seconds]

Kueng knew unreasonable force was being used: GE 7 & 7A at 20:24:48 (TL says he's passing out after AF says so beginning at 20:24:44).

CLIP GE 7: 20:24:40 - 20:24:50

CASE 0:21-cr-00108-PAM-TNL Doc. 285-2 Filed 02/25/22 Page 22 of 212

	GH	[UI] does he have a pulse?
	DW	No bro look at him! He's not responsive right now, bro!
	GH	Check, check for a pulse please. Check for a pulse.
	DW	Bro are you serious? You gonna just [UI] there with that on his neck, bro?
20:25:50	TL	You got one?
(00:17:54)		
20:25:51	GH	Let me see a pulse.
(00:17:55)		
	DW	Is he breathing right now?
	TT	[UI] having this conversation.
	AF	Handcuffed!
	DW	Check his pulse! Check his pulse! Check his pulse, Thao. [radio] Thao, check his
		pulse.
20:25:59	JK	I can't find one. [radio – several seconds]
(00:18:03)		



Kueng knew unreasonable force was being used: GE 7 & 7A at 20:25:50-59 (1st Pulse Check – can't find one).

CLIP GE 7: 20:25:40 - 20:26:00





20:25:59	JK	I can't find one. [radio – several seconds]	
(00:18:03)			
	DW	Thao, check his pulse, bro.	
	DC	Huh?	
	JK	Said I was checkin' for a pulse.	
	DW	Bro, check his pulse. Bro you bogus bro! You bogus. Don't do drugs bro? What is	
		that? What do you think that is? He so you call what he doin' okay? [radio]	
	JK	I can't find one.	

Kueng knew unreasonable force was being used: GE 7 & 7A at 20:25:59 - (Continued Pulse Checks—can't find one).

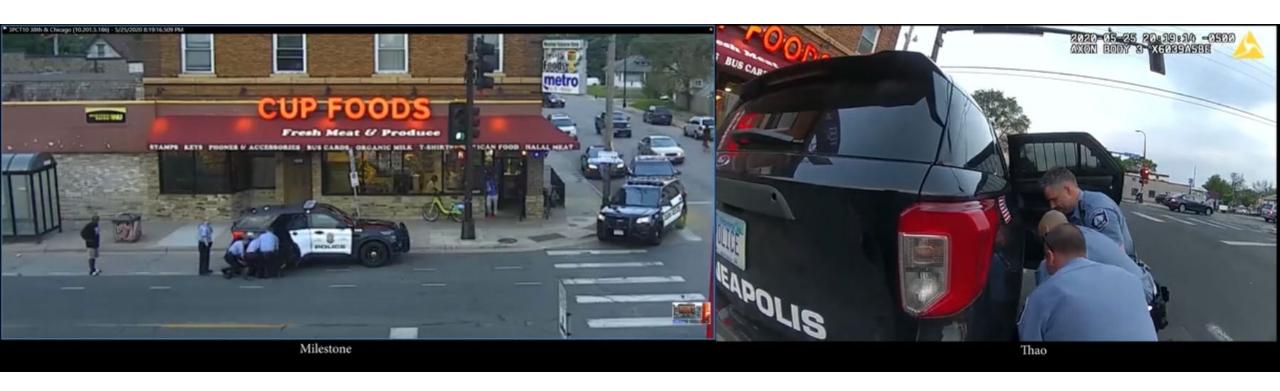
CLIP GE 7: 20:26:05 – 20:26:30

```
17
     A. True.
18
      Q. Could have a cup of coffee?
19
     A. Likely.
20
      Q. And you'd have to agree with me that your opinion is
21
     based on a lot of things that Mr. Kueng didn't know about as
22
     he sat there?
23
     A. I think from my review, counsel, respectfully, Mr. Kueng
     had a front row seat to what was going on, and you showed
24
25
      some of that in some of the still photos and we saw some of
```

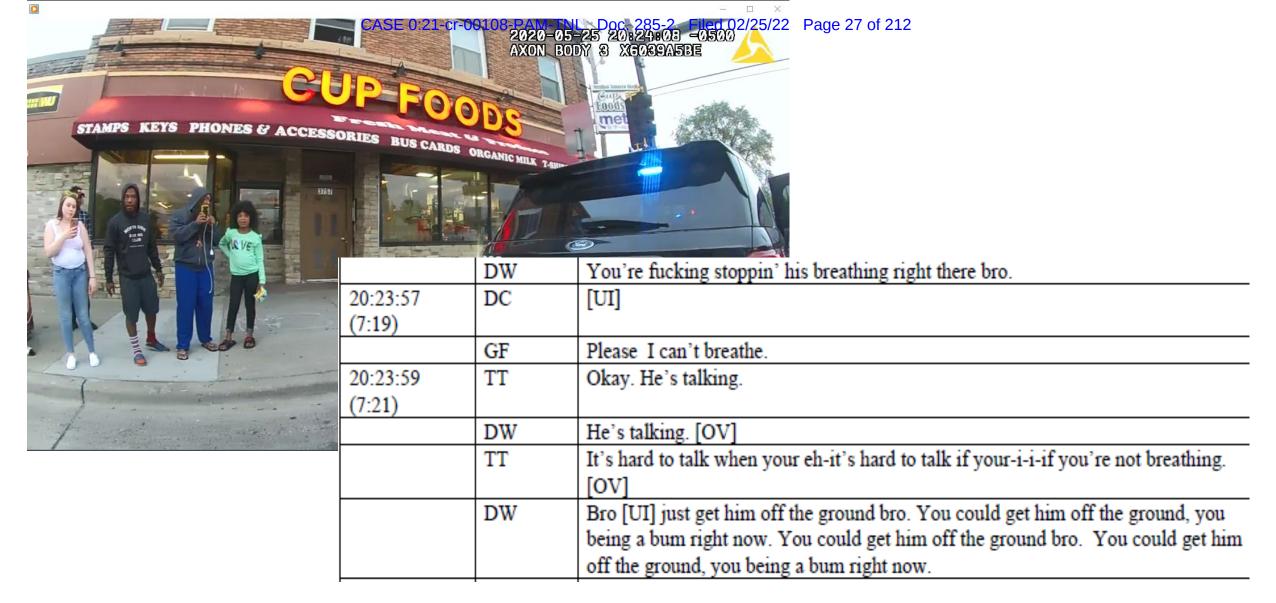
[2/7/2022] 2022-02-07_21cr108 Vol X

Kueng knew unreasonable force was being used: Tr. at 1771 (Dr. Systrom testimony)

Count 2 2(c) Def Thao had the opportunity and means to intervene to stop the unreasonable force



Def Thao had the opportunity and means to intervene: GE 27 at 20:19:14.



Thao had the opportunity and means to intervene: GE 9 at 23:55 – 20:24:10

Bystanders Begging

Clip GE 9: 20:23:55 – 20:24:10



Thao had the opportunity and means to intervene: GE 27 at 20:25:04-07

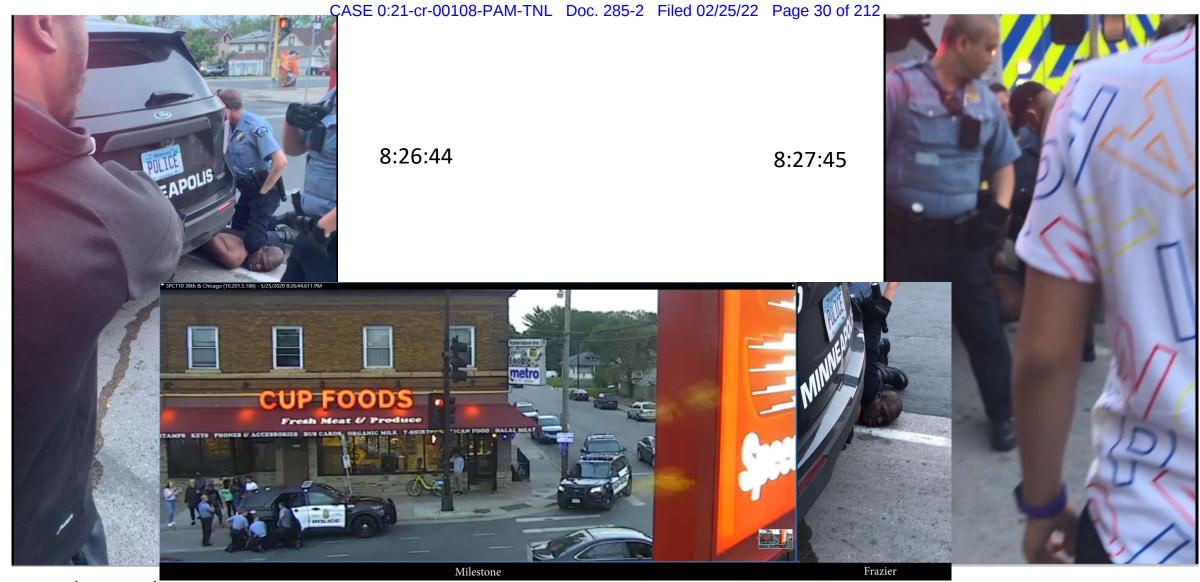
8:25:04

8:25:07

20:26:09	DW	So you call what he doin' okay?	
(9:31)			
	TT	Get back on the street.	
	DW	You call what he doin' okay?	
	AF	Badge number 7162	
	DW	You call- you call what you doin-you call what he doin' okay?	2020-05 <mark>-25, 20:26:28 -05</mark> 00
	TT	You are-are you really a firefighter? 'cause-	AXON BODY 3 X6039A5BE
20:26:17	GH	Yes I am from Minneapolis.	
(9:39)			
	TT	Okay. Okay. Then get on the sidewalk!	STAMPS KEYS PHONES & ACCESSORIES BUS CARDS
	DW	Bro you you-you call- you think that's okay? [OV]	STAMPS
	GH	You show me his pulse!	
	DW	Check his pulse!	
	TT	Okay.	
	GH	Check it right fuckin' now!	
	DW	Thao. Check his pulse.	HOTHS/OF
20:26:23	TT	Get back on the sidewalk.	BOYING CLUB
(9:45)			
	DW	Check- the man ain't moved yet bro. The man ain't moved yet bro.	
	GH	You can find me on the street.	
	TT	Okay where -where?	
20:26:29	GH	Minneapolis! [OV]	
(9:51)			
	·		

Thao had the opportunity and means to intervene: GE 9 at 20:26:09 – 20:26:29

Clip GE 9: 20:26:09 – 20:26:29 (Bystanders Begging)



GE 19 (Hanson) at 2:59

GE 20 (Funari) at 1:52

Thao had the opportunity and means to intervene: GE 21 at 20:26:44; GE 19 at 2:59; GE 20 at 1:52

		[Sitens] rucking moving right now oro.	
20:26:59	UM1	I just saw that man.	
(10:21)			
	DW	Bro he was just movin' when I walked up here. [phone ringing] [OV]	
	UM	[UI]	
	UM1	Yeah I know and then-that-he-they did that to him-they did that to him.	
	AF	So ya'll are gonna wait for the ambulance? [OV]	
	DW	Bro, you just got out here. [OV]	
	GH	Do you have a pulse? [OV]	
	DW	Bro you just got back out here bro. Bro you just got back out here bro. [OV]	
	UM1	[vibrating noise] I've been watchin' it the whole time [U]I	
20:27:08	TT	I'm busy tryin' to deal with you guy right now.	
(10:30)			
	GH	Okay, do they have pulse? [OV]	
	UM	[UI]	
	DW	He doesn't have a- bro he's not fucking moving! [OV]	
	GH	[OV][UI] them to check for one. Right now.	
	AF	[OV] [UI] there's three of you guys you should be able to fuckin' multitask! That's	
		your fuckin' job right?	
	DF	Bro they're never gonna UI	
	GH	Tell them to check one. I swear to god [UI] [OV]	
20:27:16	DW	Bro, bro! What is you 1087 bro? [OV]	
(10:38)			
	DF	Oh my God! [OV]	
	TOTAL	TYPE IS A CONCRET OVER A STREET STREET	

Thao had the opportunity and means to intervene: GE 9A



-	UF2	Why y'all still on him? He's not doin' nothing to y'all! [OV]
	DW	Bro he's- he's just gonna let him keep his hand on his neck bro? You're a bitch bro.
		Thao are you gonna- you're gonna let him keep that like that? [OV]
20:28:11	TT	H-hey if that makes you feel better about yourself go ahead. [OV]
(11:33)		
	DW	You gonna let him kill that man in front of you bro? Huh? [OV]
	AF	[UI] [OV]
	DW	Huh? [OV]
20:28:14	UF2	Like what? Ya'll know that's not right. [OV]
(11:36)		
, ,	DW	Bro he's not even fuckin' moving right now. This is not [UI]
		+

Thao had the opportunity and means to intervene: GE 9 at 20:28:01 – 20:28:17

(Clip from 20:28:01 – 20:28:17)(Bystanders Begging for Thao to Help)

```
BY MS. BELL:
16
17
      Q. Okay. What did you observe? What, if anything, did you
18
      observe Officer Thao do to comply with the MPD policy and
19
      training on duty to intervene as you reviewed the video or
     videos?
20
     A. I didn't see any part of duty to intervene on the video.
21
22
      Q. Did you see anything in the video that you watched that
23
     would have prevented Officer Thao from complying with the
24
     MPD policy and training on duty to intervene?
25
     A. I did not.
```

[1/28/2022] 2022-01-28_21cr108 Vol VII

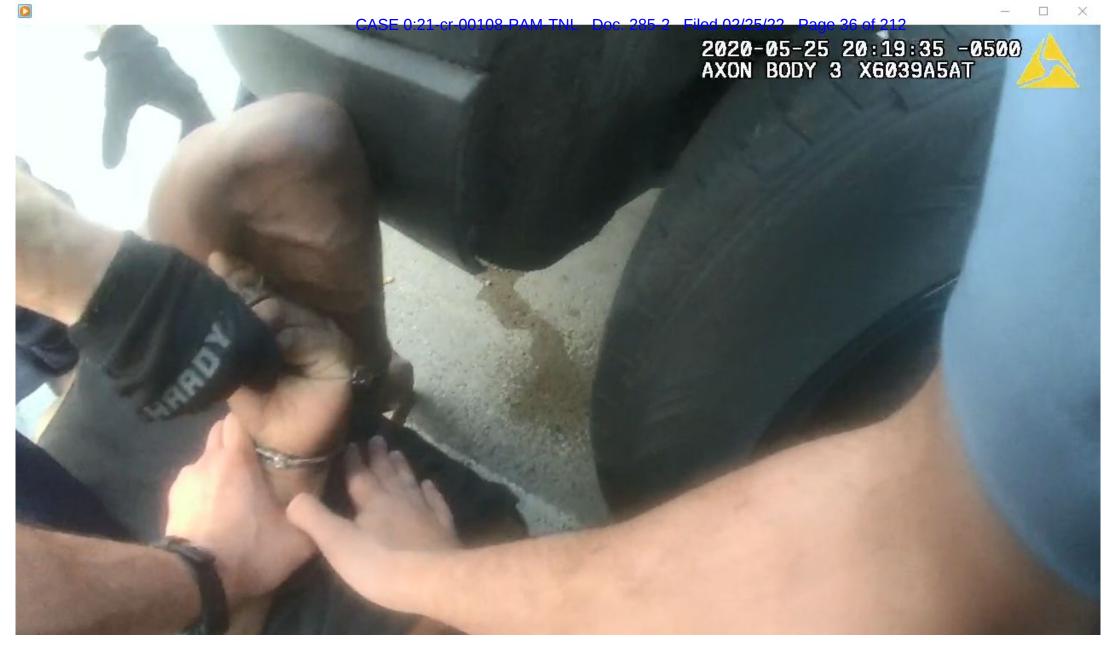
Thao had the opportunity and means to intervene: Tr. at 1121 (Inspector Blackwell testimony)

Count 2 2(c) Def Kueng had the opportunity and means to intervene to stop the unreasonable force



Def Kueng had the opportunity and means to intervene: GE 7 at 20:19:17 (Seconds after Chauvin starts restraint and JK still reaching for [and ostensibly looking down at] hands only inches from neck restraint)

Clip 20:19:15 – 20:19:35 (Then don't need next slide)



Kueng had the opportunity and means to intervene: GE 7 at 20:19:35 (Helping to hold down GF and full perspective of neck restraint)

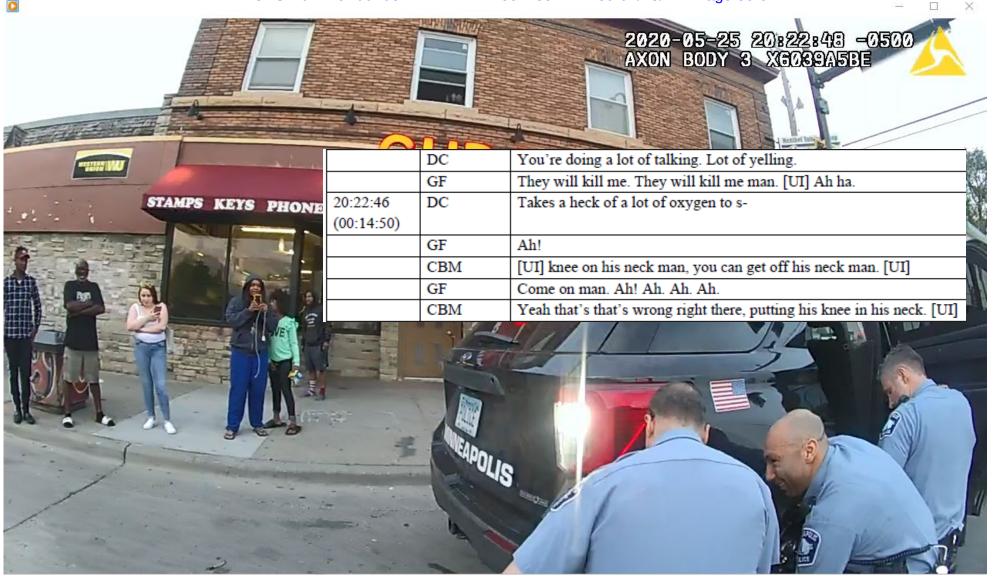


Kueng had the opportunity and means to intervene: GE 7 at 20:22:00 (Helping to hold down GF; full perspective of neck restraint; GF has just told TT he can't breathe shit)



Kueng had the opportunity and means to intervene: GE 7 at 22:22:18 (Not otherwise occupied by the crowd; rock picking)

Clip 20:22:18 – 20:22:28



Kueng had the opportunity and means to intervene: GE 9 & 7A at 20:24:39 - 48

CLIP GE 9: 20:22:35 – 20:22:48

	CA	ASE 0:21-cr-00	108-PAM-TNL Doc. 285-2 Filed 02/25/22 Page 40 of 212 ×
Axon_Body_3_Video_2020-05-25	5_2008		2020-05-25 20:25:04 -0500 AXON BODY 3 X6039A5AT
	20:24:44 (00:16:47)	AF	He's about to pass out.
		TL	Yeah I think he's passing out. [radio]
		DW	He's fuckin' stopping his breathing right now bro. You think that's cool?
		GF	[soft groan] [radio – continues for several seconds]
		DW	You think that's cool though right? What's your what's your oh what's your] badge number bro? You think that's cool right now bro?
A III		DC	It's alright though?
1	20:24:58 (00:17:02)	TL	Yeah, I mean.
	20:24:59 (00:17:03)	JK	Good so far.
of the last of the		TL	My knee might be a little scratched, but I'll survive. [radio]
		13:28	

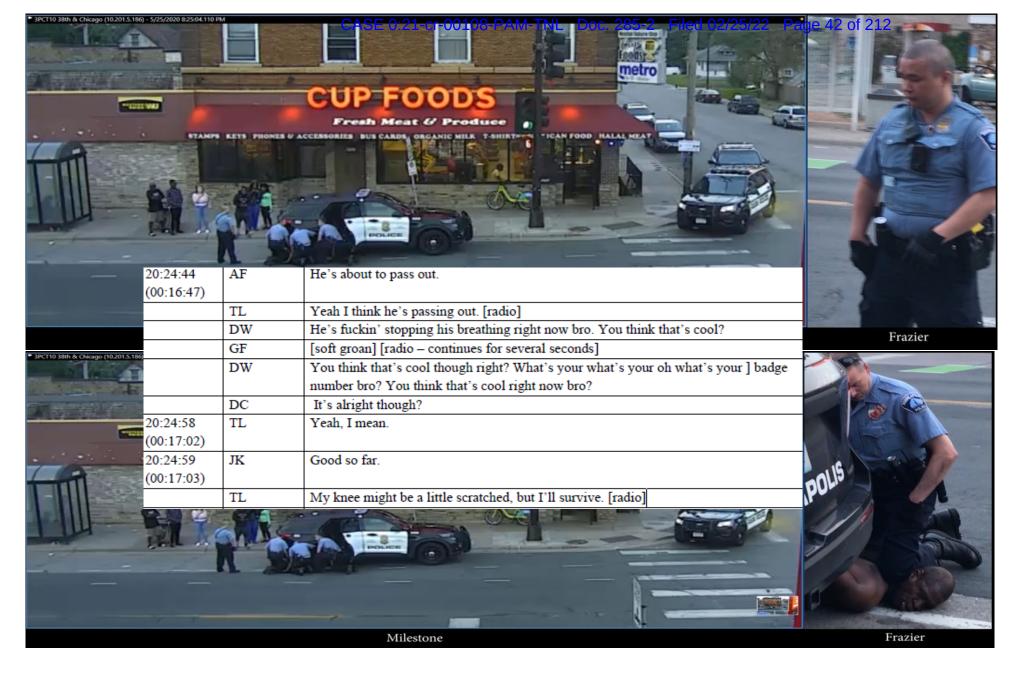
Kueng had the opportunity and means to intervene: GE 7 & 7A at 20:24:45 – 20:25:04

CLIP GE 7: 20:24:44 - 20:25:04



Kueng had the opportunity and means to intervene: GE 7 & 7A at 20:24:45 – 20:25:04

CLIP GE 7: 20:24:44 - 20:25:04



8:25:04

8:25:07

Kueng had the opportunity and means to intervene: GE 27 at 20:25:04 – 07



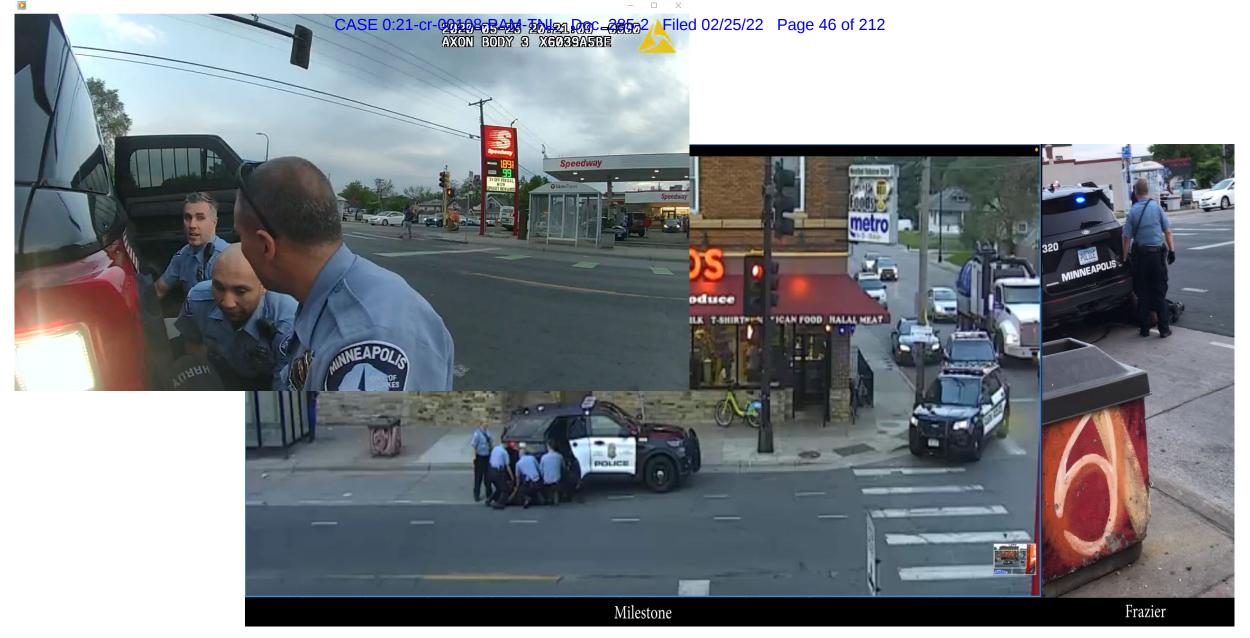
Kueng had the opportunity and means to intervene: GE 7 at 22:28:42 (EMTs arrived but DC still on GF; JK still has full perspective of neck restraint)

Q. What, if anything, did you observe in the video that you watched that would have prevented or could have prevented Mr. Kueng from complying with the MPD policy and training on the duty to intervene?

A. Nothing.

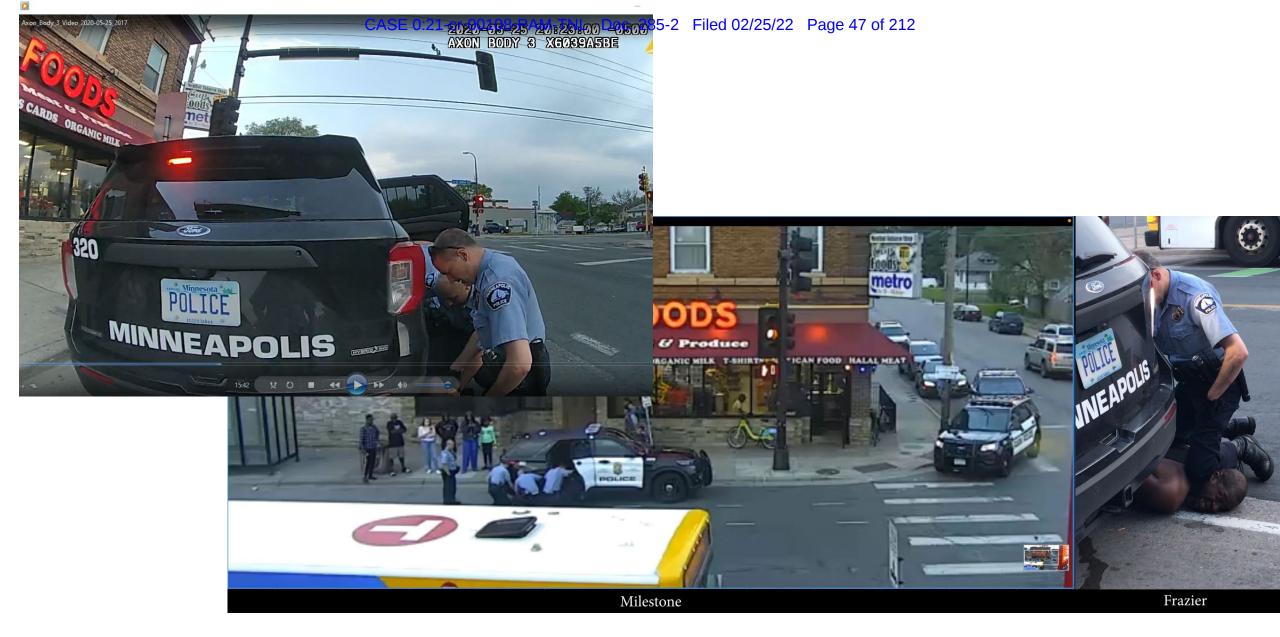
Kueng had the opportunity and means to intervene: Tr. at 1126 (Inspector Blackwell testimony)

Count 2 2(d) Def Thao failed to take reasonable steps to intervene



Def Thao failed to take reasonable steps to intervene: GE 9 & GE 21 at 20:21:00 (TT facing and has full perspective of neck restraint)

Clip GE 9 at 20:21:00 – 20:21:10 (Doing Nothing to Intervene)



Thao failed to take reasonable steps to intervene: GE 9 & GE 21 at 20:23:00 (TT facing and has full perspective of neck restraint)

Clip GE 9 at 20:23:00 – 20:23:10 (Doing Nothing to Intervene)



Thao failed to take reasonable steps to intervene: GE 9 & GE 21 at 20:24:04 & 07 (TT facing and has full perspective of neck restraint)

Clip GE 21 at 20:24:55 – 20:25:10 (Doing Nothing to Intervene)

8:25:04

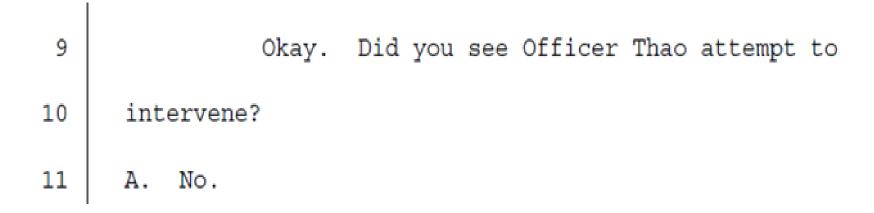
8:25:07

```
BY MS. BELL:

Q. Okay. What did you observe? What, if anything, did you observe Officer Thao do to comply with the MPD policy and training on duty to intervene as you reviewed the video or videos?

A. I didn't see any part of duty to intervene on the video.
```

Thao failed to take reasonable steps to intervene: Tr. at 1121 (Inspector Blackwell testimony)



Thao failed to take reasonable steps to intervene: Tr. at 2523 (Lt. Zimmerman testimony)

17	Q. Yes. The question was: Was Mr. Thao's conduct
18	consistent or inconsistent with the generally accepted
19	policing practices regarding the duty to intervene?
20	A. With respect to the duty to intervene, it was contrary
21	to generally accepted policing practices.
22	Q. Why was that?
23	A. Because he didn't do anything.

Thao failed to take reasonable steps to intervene: Tr. at 2818 (Chief Longo testimony)

Count 2 2(d) Def Kueng failed to take reasonable steps to intervene



Def Kueng failed to take reasonable steps to intervene: GE 7 at 20:19:17 (Seconds after Chauvin starts restraint and JK still reaching for [and ostensibly looking down at] hands only inches from neck restraint)



Kueng failed to take reasonable steps to intervene: GE 7 at 20:19:35 (Helping to hold down GF and full perspective of neck restraint)



Kueng failed to take reasonable steps to intervene: GE 7 at 20:22:00 (Helping to hold down GF; full perspective of neck restraint; GF has just told TT he can't breathe, referencing the knee on his neck)



Kueng failed to take reasonable steps to intervene: GE 7 at 22:28:42 (EMTs arrived but DC still on GF; JK has full perspective of neck restraint)

21	Q. All right. With respect to Officer Kueng, in your
22	review of any of the videos that you saw, did you observe
23	Officer Kueng take any steps to comply with the MPD policy
24	on the and training on the duty to intervene?
25	A. I did not.

Kueng failed to take reasonable steps to intervene: Tr. at 1125 (Inspector Blackwell testimony)

Q. Did you see Officer Kueng attempt to intervene?

Kueng failed to take reasonable steps to intervene: Tr. 2523 (Lt. Zimmerman testimony)

```
9
      A. I believe Mr. Kueng's conduct was contrary to generally
10
      accepted policing practices with respect to his duty to
      intervene.
11
      Q. Why is that your opinion?
12
      A. Well, because like others, he saw what was taking place.
13
      He saw Chauvin's knee on Mr. Floyd's neck. He saw Mr. Floyd
14
      pinned to the ground. He assisted in that regard. He had
15
      the opportunity to take Mr. Floyd's pulse. He couldn't find
16
17
      one. Those are just a handful of reasons why I think my
      opinion is supported in that regard.
18
```

Kueng failed to take reasonable steps to intervene: Tr. 2823 (Chief Longo testimony)

Count 2 3. Def Thao committed the acts or omissions willfully

ELECTRONIC VERSION OF THE MPD POLICY & PROCEDURE MANUAL
I understand that I am accountable for knowing and abiding by all policies and procedures contained within the Minneapolis Police Department Policy and Procedure Manual and that I will be held accountable for abiding by the policies and procedures contained therein.
I have read the instructions and understand how to access the online electronic version of the Minneapolis Police Department Policy and Procedure Manual.
If you do not understand how to access the online manual, see your immediate supervisor for fraining until you are able to successfully access the online manual.
NAME: (Please print)
SIGNED:
BADGE/EMPLOYEE #:
DATE: 1-17-2012
SIGNATURE AND RETURN OF THIS RECEIPT IS MANDATORY

VOLUME FIVE - CODE OF CONDUCT AND USE OF FORCE

USE OF FORCE

5-301 PURPOSE (10/16/02) (08/17/07) (07/28/16)

A. Sanctity of life and the protection of the public shall be the cornerstones of the MPD's use of force policy.

5-301.01 POLICY (10/16/02) (08/17/07)

Based on the Fourth Amendment's "reasonableness" standard, sworn MPD employees shall only use the amount of force that is objectively reasonable in light of the facts and circumstances known to that employee at the time force is used. The force used shall be consistent with current MPD training.

5-303.01 **DUTY TO INTERVENE (07/28/16)**

(A-D)

- A. Sworn employees have an obligation to protect the public and other employees.
- **B.** It shall be the duty of every sworn employee present at any scene where physical force is being applied to either stop or attempt to stop another sworn employee when force is being inappropriately applied or is no longer required.

C. Neck restraints shall not be used against subjects who are passively resisting as defined by policy. (04/16/12)

Thao's failure to intervene was willful: GE 46 at 5-311 II.C.

Side Recovery Position: Placing a restrained subject on their side in order to reduce pressure on his/her chest and facilitate breathing.

Thao's failure to intervene was willful: GE 46 at 5-316 III (definitions)

WorkForce Director Page 1 of 6 **Training Records** Training History for: Tou Thao Employee Id: 007162 **Total Continued Education Credits: 1014.0 Total Instructor Credits: 0.0** Add (Add training that are not associated with an existing Event/TimeSlot) Continued Instructor Make Model # Commer Start End Course Grade Date Date Credits 2020 Annual Semi-Automatic Handgun and Gas Mask Fit Testing, Janaury - February, Edit Delete Multiple dates 2/6/2020 2/6/2020 PASS 1.00 2019 Annual In-Service Training Program, Phase III, September -Edit Delete December 2019 12/3/2019 | 12/3/2019 | Applicable 7.00 2019 Annual In-Service Training Program, Phase III, September Edit Delete December 2019 12/2/2019 | 12/2/2019 | Applicable 7.00 2019 Annual In-Service Training Program, Phase II, (Apr-Aug/Sep Edit Delete 25-26) 6/13/2019 6/13/2019 Applicable 7.00 2019 Annual In-Service Training Program, Phase II, (Apr-Aug/Sep Edit Delete 25-26) 6/12/2019 6/12/2019 Applicable 7.00

Duty to Intervene (5-303.01 Updated))

- MPD employees have an obligation to protect the public & other employees
- If you're present when inappropriate physical force is being applied, or is no longer required, it is your DUTY to stop the application of force



US001

Use of Neck Restraints (5-311)

Conscious NR is OK on Actively Resistant Subjects

Unconscious NR only applied under the following circumstances:

- On subjects who are exhibiting active aggression, or;
- For life saving purposes, or;
- On subjects who are exhibiting active resistance in order to gain control of a subject and if lesser attempts at control have been or would likely be ineffective.
- NOTE –NR shall not be used against subjects who are demonstrating passive resistance as defined by policy.



US001

Maximal Restraint Technique (5-316)

<u>Definitions</u>

- Hobble Restraint Device
 - "RIPP Hobble" used to limit movement by tethering legs together
- Maximal Restraint Technique (MRT)
 - Securing feet to waist to prevent movement
 - Limits property damage or injury to self/others
- Prone Position
 - Subject face down
- Side Recovery Position
 - Subject on side while in restraints; reduces chest pressure & helps breathing



US001

MRT - Safety

- Side Recovery Position ASAP
- No Prone Transport
- Monitor until EMS or transfer of custody
- Request EMS if medical condition arises
- Transported 2-person squad; seat belt on and seated upright or side lying in squad
- MVR activated and Body Cameras activated
- Notify next agency of MRT application

NOTE – do not hogtie unless no other option (i.e. life saving measures) and change to MRT as soon as possible



118004

1025 – Instructor Demonstration – Breakdown, neck restraint, lower to ground, prone handcuff, sit opponent up, and bring opponent to standing

Thao's failure to intervene was willful: GE 62 (2019 Defensive Tactics lesson plans)

Drill – By bullet point

Subject from prone to standing

- Support subject's neck with a C grip
- Grab one arm of subject
- Roll them up to a seated position
- Gerber slap to their lower back if they have not regained consciousness (Get medical immediately if unconscious for more than 30 seconds)
- Have subject tuck a leg in/bend their knee
- Push subject toward that bent knee to a kneeling position
- Push towards kneeling side to stand

Drill - Prone to standing

Thao's failure to intervene was willful: GE 62 (2019 Defensive Tactics lesson plans)

Duty to Intervene (5-303.01)

- MPD employees have an obligation to protect the public & other employees
- If you're present when inappropriate physical force is being applied, or is no longer required, it is your DUTY to stop the application of force



US001

Thao's failure to intervene was willful: GE 63

Taser, Chemical Agents, Impact Weapons, Neck Restraints

Only permitted under the following circumstances:

- On subjects who are exhibiting active aggression, or;
- For life saving purposes, or;
- On subjects who are exhibiting active resistance in order to gain control of a subject and if lesser attempts at control have been or would likely be ineffective.
- NOTE shall not be used against subjects who are demonstrating passive resistance as defined by policy.



US001

MRT – Safety (5-316)

- Side Recovery Position ASAP
- No Prone Transport
- Monitor until EMS or transfer of custody
- Request EMS if medical condition arises
- Transported 2-person squad; seat belt on and seated upright or side lying in squad
- MVR activated and Body Cameras activated
- Notify next agency of MRT application

NOTE – do not hogtie unless no other option (i.e. life saving measures) and change to MRT as soon as possible



US001

Thao's failure to intervene was willful: GE 63

Count 2 3. Def Kueng committed the acts or omissions willfully

POLICY & PROCEDURE MANUAL

I understand that I am accountable for knowing and abiding by all policies and procedures contained within the Minneapolis Police Department Policy and Procedure Manual and that I will be held accountable for abiding by the policies and procedures contained therein.

I have read the instructions and understand how to access the online electronic version of the Minneapolis Police Department Policy and Procedure Manual.

If you do not understand how to access the online manual, see your immediate supervisor for training until you are able to successfully access the online manual.

NAME: J. Alexander Kueng
(Please print)

SIGNED: J. Juerg

BADGE/EMPLOYEE #: 3897

DATE: 2/7/2019

SIGNATURE AND RETURN OF THIS RECEIPT IS MANDATORY

VOLUME FIVE - CODE OF CONDUCT AND USE OF FORCE

USE OF FORCE

5-301 PURPOSE (10/16/02) (08/17/07) (07/28/16)

A. Sanctity of life and the protection of the public shall be the cornerstones of the MPD's use of force policy.

5-301.01 POLICY (10/16/02) (08/17/07)

Based on the Fourth Amendment's "reasonableness" standard, sworn MPD employees shall only use the amount of force that is objectively reasonable in light of the facts and circumstances known to that employee at the time force is used. The force used shall be consistent with current MPD training.

5-303.01 **DUTY TO INTERVENE (07/28/16)**

(A-D)

- A. Sworn employees have an obligation to protect the public and other employees.
- **B.** It shall be the duty of every sworn employee present at any scene where physical force is being applied to either stop or attempt to stop another sworn employee when force is being inappropriately applied or is no longer required.

C. Neck restraints shall not be used against subjects who are passively resisting as defined by policy. (04/16/12)

Kueng's failure to intervene was willful: GE 46 at 5-311 II.C.

Side Recovery Position: Placing a restrained subject on their side in order to reduce pressure on his/her chest and facilitate breathing.

Kueng's failure to intervene was willful: GE 46 at 5-316 III (definitions)

			ining Histo	ree Id: 003	eng 1897	ing Recor					
	Total	Continued E Total Ir	ducation C	redits: 30.0	0						
L	Add	(Add trainin	ng that are	not associ	ated with	an existing E	vent/TimeSlo	ot)			
L		Course	Start Date	End Date	Grade	Continued Education Credits	Instructor Credits	Make	Model	Serial	Comment
60	fit Dele	2020 Annus In-Service Training Program, Phase I, January - April, Multiple Se Dates		2/11/202	Not Applicate	e 7.00					
Ed	it Dele	2020 Annua In-Service Training Program, Phase I, January - April, Multiple Dotes	it		Not Applicable						
Edi	t Delet	2020 Annual Semi- Automatic Handgun and Gas Mask FR Testing, Jansury - February, Multiple dates	1/14/2020			1.00					
Edi	Deleti	2019 X-CEL Energy Active Shooter Exercise, December 14, 2019		12/14/2019	Not						
Edit	Delete		12/12/2019		Not						**Academy
Edit	Delete		11/4/2019	11/5/2019	Not Applicable	0.00					**Academy
	Delete		8/19/2019	8/22/2019	Not Applicable	0.00					*Academy ourse
Edit	Delete	2018 PIMS Basic Training-	5/22/2018	5/22/2018	Not Applicable	8.00					GOVE

As a Police Officer you will be responsible not only for your actions but also for the actions of your partner and others. The Training Staff expects the Recruits to police each other on matters of dress, behavior, and adherence to rules and regulations. When it becomes necessary for the Training Staff to address these issues with an individual it becomes a matter of record and the consequences are generally more severe. You will be held responsible for your actions and inactions.

Minneapolismn.gov

5-300 Use of Force

5-301 PURPOSE (10/16/02) (08/17/07) (07/28/16)

- A. Sanctity of life and the protection of the public shall be the cornerstones of the MPD's use of force policy.
- B. The purpose of this chapter is to provide all sworn MPD employees with clear and consistent policies and procedures regarding the use of force while engaged in the discharge of their official duties. (Note: MPD Training Unit Lesson Plans – Use of Force, are used as a reference throughout this chapter.)

5-301.01 POLICY (10/16/02) (08/17/07)

Based on the Fourth Amendment's "reasonableness" standard, sworn MPD employees shall only use the amount of force that is objectively reasonable in light of the facts and circumstances known to that employee at the time force is used. The force used shall be consistent with current MPD training.

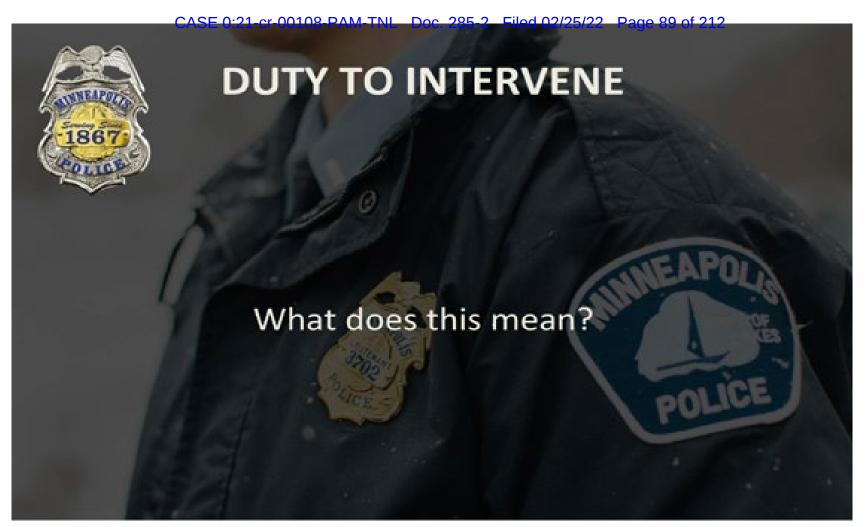
5-303.01 DUTY TO INTERVENE (07/28/16)

(A-D)

- A. Sworn employees have an obligation to protect the public and other employees.
- B. It shall be the duty of every sworn employee present at any scene where physical force is being applied to either stop or attempt to stop another sworn employee when force is being inappropriately applied or is no longer required.

PROCEDURES/REGULATIONS II.

- A. The Conscious Neck Restraint may be used against a subject who is actively resisting. (04/16/12)
- B. The Unconscious Neck Restraint shall only be applied in the following circumstances: (04/16/12)
 - On a subject who is exhibiting active aggression, or;
 - 2. For life saving purposes, or;
 - On a subject who is exhibiting active resistance in order to gain control of the subject; and if lesser attempts at control have been or would likely be ineffective.
- Neck restraints shall not be used against subjects who are passively resisting as defined by policy. (04/16/12)
- D. After Care Guidelines (04/16/12)
 - After a neck restraint or choke hold has been used on a subject, sworn MPD employees shall keep them under close observation until they are released to medical or other law enforcement personnel.
 - An officer who has used a neck restraint or choke hold shall inform individuals accepting custody of the subject, that the technique was used on the subject.

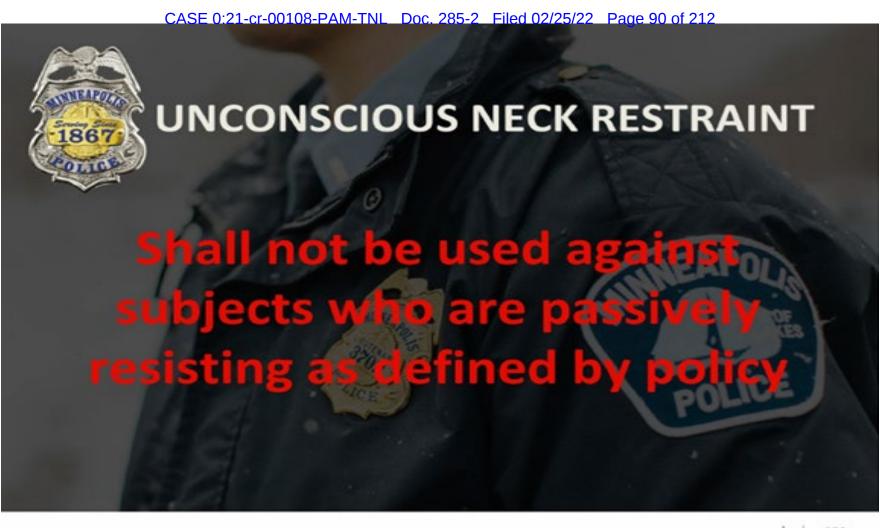


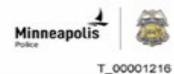


19004

T_00001188

Kueng's failure to intervene was willful: GE 73



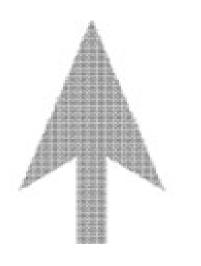


US001









Mindset Minute (Vascular Neck Restraint)

When you apply the Vascular Neck Restraint remember to breathe and make sure you hold the pressure long enough to allow the technique to work. It will take anywhere from 6-15 seconds to render your opponent unconscious. However, be aware that if you release their neck immediately, they may wake up spontaneously within a few seconds. It is important to be able to recognize when they are unconscious so that you can immediately transition to another form of control such as handcuffing. To avoid exposure to unnecessary injury, do not continue to apply the Vascular Restraint after you are aware that they have completely passed out.

Test of Proportionality

- Neck Restraints (conscious or unconscious applications) shall only be used against subjects when lower force
 options either:
- Have failed,
- Will likely fail, or
- Are too dangerous to attempt
- Neck Restraints shall not be used against persons who are only displaying Passive Resistance as defined by policy. Test of Proportionality
- · If unconsciousness occurred, request EMS immediately by radio
- Loosen clothing & jewelry around the SUB's neck area
- Check airway & breathing start CPR if needed

After a Neck Restraint has been applied, you shall keep them under close observation until they are released to medical or other law enforcement personnel.

Transfer of Custody

- Prior to transferring custody of a subject that force was used upon, you shall verbally notify the receiving agency or employee of:
- The type of force used,
- Any injuries sustained (real or alleged) and

Prone Position: For purposes of this policy, the term Prone Position means to lay a restrained subject face down on their chest.

Side Recovery Position: Placing a restrained subject on their side in order to reduce pressure on his/her chest and facilitate breathing.

- (1-403) Employees shall truthfully answer questions or render material(s) and relevant statements in a departmental investigation when so directed, consistent with the constitutional rights of the employees.
 - A. True
- 9. (1-407) Who oversees a scene at a Police Incident, if a superior (higher ranking) officer is absent?
 - A. Senior officer at the scene
 - B Senior officer of the 1st squad to arrive at the scene
 - C. B of I
 - D. No one is in charge until a superior arrives





MINNEAPOLIS POLICE DEPARTMENT OPERATIONS SECTION NUMBER: 5-100 DATE: 18 HINE 2018

5-101.01 TRUTHFULNESS (01/26/05) (11/15/13)

The integrity of police service is based on truthfulness. Officers shall not willfully or knowingly make an untruthful statement, verbally or written, or knowingly omit pertinent information pertaining to his/her official duty as a Minneapolis Police Officer.

applicable State and Federal law. All employees of the Minneapolis Police Department are required

MPD employees shall not willfully or knowingly make an untruthful statement or knowingly omit pertinent information in the presence of any supervisor, intended for the information of any supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation. (12/14/07)

supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation.

These requirements apply to any report, whether verbal or written, concerning official MPD business including, but not limited to, written reports, transmissions to MECC and officers via radio, telephone, pager, e-mail or MDC.

GOVERNMENT EXHIBIT 45 21-cr-108 (PAM/TNL) 00005950

Count 3. 2(b) Def Thao knew that George Floyd had a serious medical need



	TT	What are you- what are you on?
20:21:53 (5:15)	GF	I can't breathe! Please, the knee on my neck. I can't breathe shit. Uh ah.

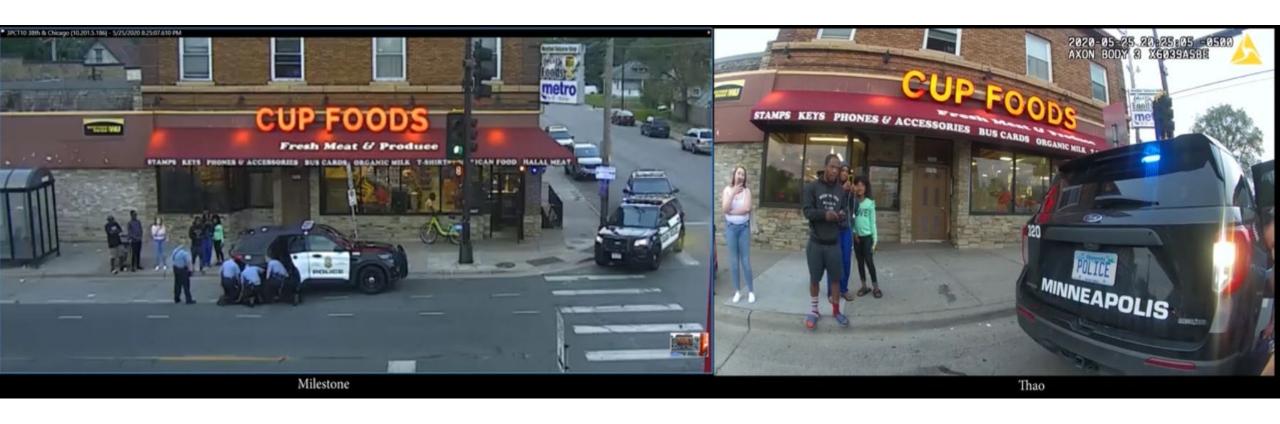
Def Thao knew that George Floyd had a serious medical need: GE 9 & GE 9A at 20:21:48 – 20:22:00 Clip 20:21:50 – 20:22:00.



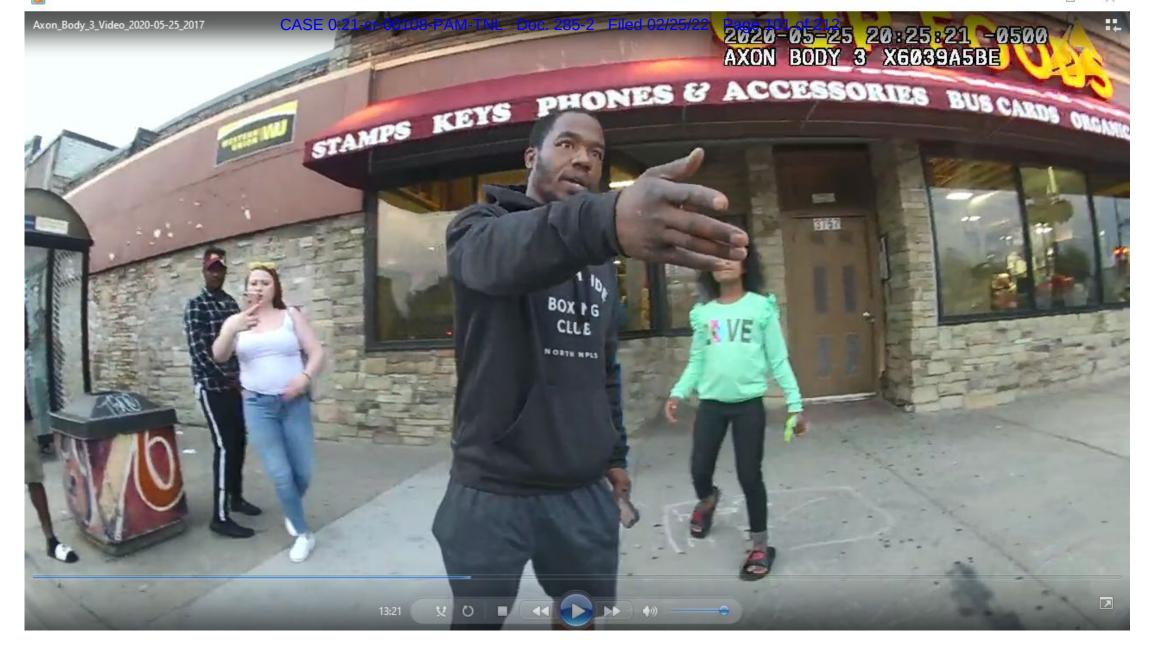
8:25:04

8:25:07

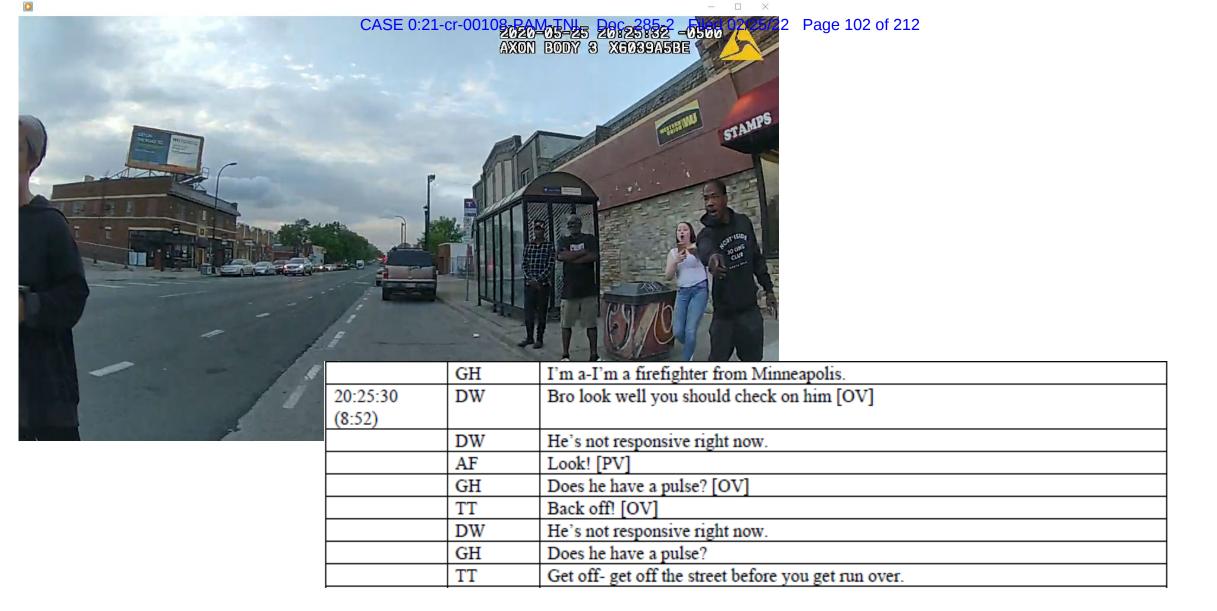
Thao knew that George Floyd had a serious medical need: GE 9 & GE 21 at 20:24:04 & 07 (TT facing and has full perspective of neck restraint)



Thao knew that George Floyd had a serious medical need: GE 27 at 20:25:05.



Thao knew that George Floyd had a serious medical need: GE 9 at 20:25:21.



Thao knew that George Floyd had a serious medical need: GE 9 & 9A at 20:25:30 (Look!) (Clip from 20:25:25 – 20:25:40)

20:25:42 (9:04)	DW	He's not responsive right now bro.
	GH	I'm watching. Does he have a pulse?
	DW	No bro look at him he's not responsive right now. [OV]
	GH	Check- check him for a pulse. Please. [OV]
20:25:48 (9:10)	TT	Okay. We have an ambulance coming. [OV]
	GH	Check for a pulse. [OV]
	DW	Bro, bro are you serious? You gonna just let him sit there with that on his neck.
	AF	[UI]
	GH	Check for a pulse. [OV]
20:25:51 (9:13)	GH	Let me see a pulse!
	DW	Is he breathing right now? [OV]
	AF	He's handcuffed! [OV]
	DW	Check his pulse!
20:25:56 (9:18)	TT	Alright [UI]. How long are we gonna have this conversation?
	DW	Check his pulse!
	TT	Okay.
20:25:57 (9:19)	DW	Check his pulse, Thao.
	GH	I'm telling you right now check his pulse [OV]
	TT	Alright.
	DW	Thao, check his pulse bro.
	TT	Yeah? Okay.
	DW	Thao, check his pulse, bro.



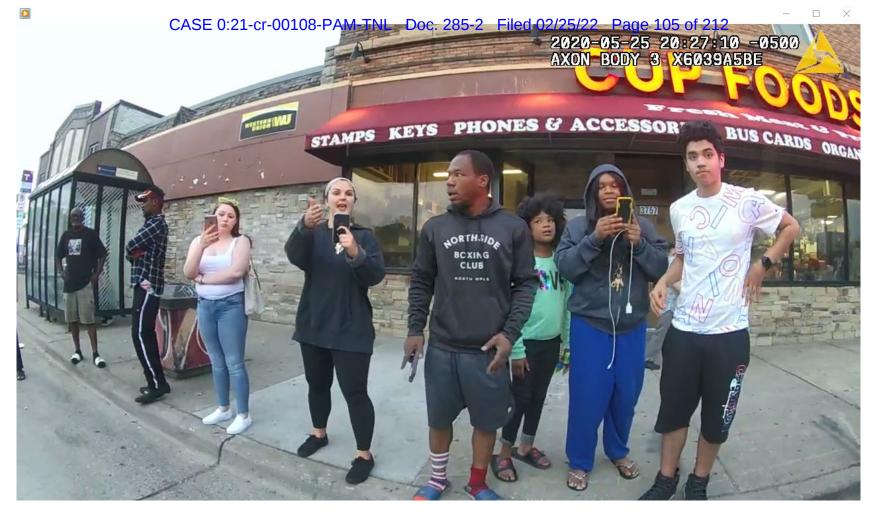
Thao knew that George Floyd had a serious medical need: GE 9 & 9A at 20:25:42 (Check for Pulse!) (Clip from 20:25:35 – 20:25:55)

	DW	Check his pulse! CASE 0:21-cr-00108-PAM-TNL Doc. 28
20:25:56	TT	Alright [UI]. How long are we gonna have this conversation?
(9:18)		
	DW	Check his pulse!
	TT	Okay.
20:25:57 (9:19)	DW	Check his pulse, Thao.
	GH	I'm telling you right now check his pulse [OV]
	TT	Alright.
	DW	Thao, check his pulse bro.
	TT	Yeah? Okay.
	DW	Thao, check his pulse, bro.
	DF	Look at this dude.
	TT	Just we've got EMS coming. Alright.
	DW	Bro, check his pulse, bro. Bro, check his pulse. You bogus bro. You bogus. [OV]
20:26:04 (9:26)	TT	Don't—don't do drugs guys.
	DW	Don't do drugs bro?
	TT	Exactly.
	DW	What is that?!
	GH	Check his pulse right now. [OV]
20:26:07	DW	What do you think that is?!
(9:29)		·
	TT	Okay. Okay.
20:26:09	DW	So you call what he doin' okay?
(9:31)		y y

Filed 02/25/22 Page 104 of 212



Thao knew that George Floyd had a serious medical need: GE 9 & 9A at 20:25:42 (Don't do drugs) (Clip from 20:25:50 – 20:26:10)



	GH	Do you have a pulse? [OV]
	DW	Bro you just got back out here bro. Bro you just got back out here bro. [OV]
	UM1	[vibrating noise] I've been watchin' it the whole time [U]I
20:27:08	TT	I'm busy tryin' to deal with you guy right now.
(10:30)		
	GH	Okay, do they have pulse? [OV]

Thao knew that George Floyd had a serious medical need: GE 9 & 9A at 20:27:05-10 (Clip from 20:27:05 – 20:27:10) (Interacted with Bystanders)

Count 3 2(b) Def Kueng knew that George Floyd had a serious medical need



Kueng knew that George Floyd had a serious medical need: GE 7 at 20:19:35

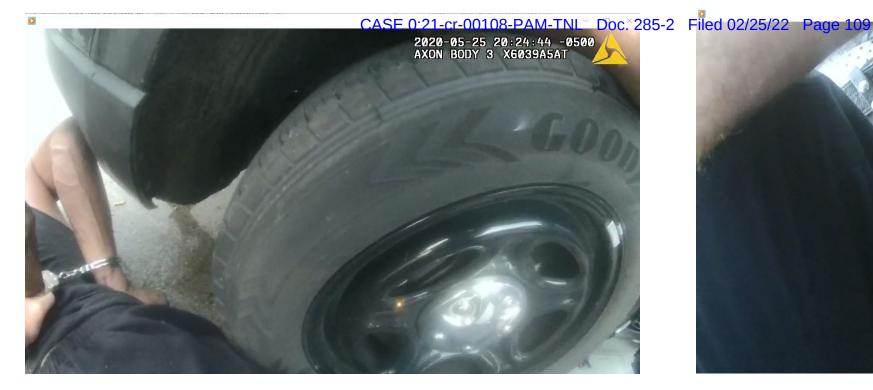
CASE 0(210crs00100-PAM-TNL IsDe Chi 285n2 on File Chi 92/25/22 Page 108 of 212

(00:13:02)		
	GF	Oh.
	TL	I'm assuming so.
	GF	Oh.
20:21:00	JK	I believe so. We found a pipe on him. [OV]
(00:13:04)		



Kueng knew that George Floyd had a serious medical need: GE 7 & 7A at 20:25:50-59 (TT asks if he's high on something. TL & JK both respond).

CLIP GE 9: 20:20:57 – 20:21:02





20:24:44	AF	He's about to pass out.
(00:16:47)		
	TL	Yeah I think he's passing out. [radio]
	DW	He's fuckin' stopping his breathing right now bro. You think that's cool?
	GF	[soft groan] [radio – continues for several seconds]

Kueng knew that George Floyd had a serious medical need: GE 7 & 7A at 20:24:48 (TL says he's passing out after AF says so beginning at 20:24:44).

CLIP GE 7: 20:24:40 - 20:24:50

CASE 0:21-cr-00108-PAM-TNL Doc. 285-2 Filed 02/25/22 Page 110 of 212

	GH	[UI] does he have a pulse?
	DW	No bro look at him! He's not responsive right now, bro!
	GH	Check, check for a pulse please. Check for a pulse.
	DW	Bro are you serious? You gonna just [UI] there with that on his neck, bro?
20:25:50	TL	You got one?
(00:17:54)		
20:25:51	GH	Let me see a pulse.
(00:17:55)		
	DW	Is he breathing right now?
	TT	[UI] having this conversation.
	AF	Handcuffed!
	DW	Check his pulse! Check his pulse! Check his pulse, Thao. [radio] Thao, check his
		pulse.
20:25:59	JK	I can't find one. [radio – several seconds]
(00:18:03)		



Kueng knew that George Floyd had a serious medical need: GE 7 & 7A at 20:25:50-59 (Kueng can't find a pulse)

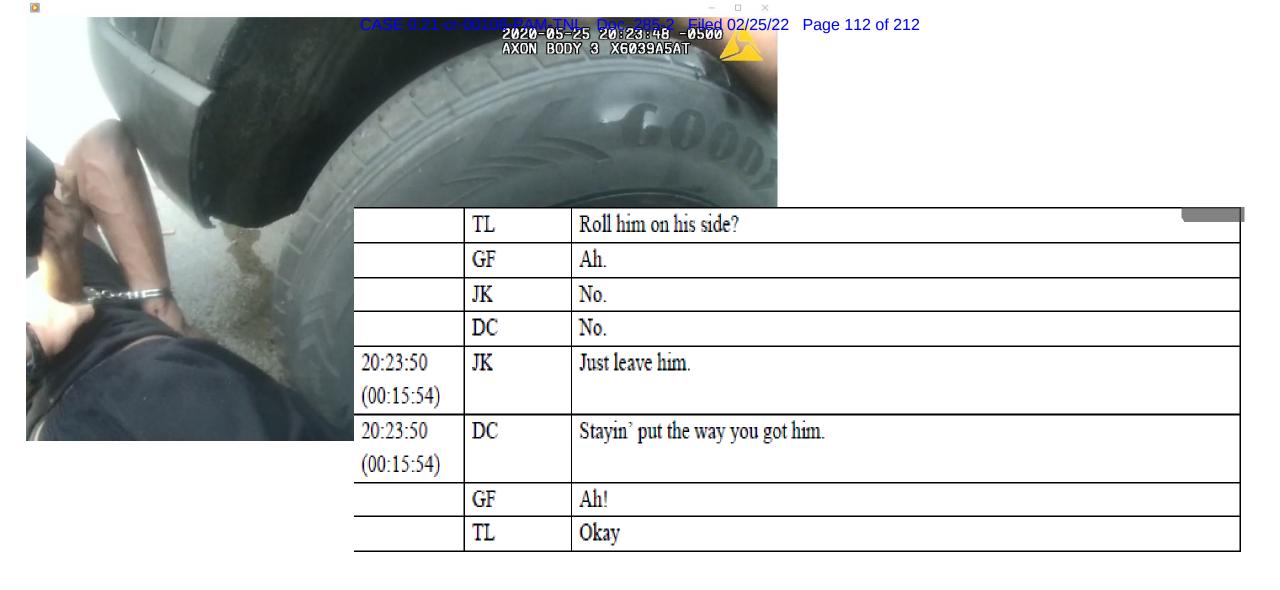
CLIP GE 7: 20:25:50 - 20:26:00

CASE 0:21-cr-00108-PAM-TNL Doc. 285-2 Filed 02/25/22 Page 111 of 212 2020-05-25 20:25:55 -0500 AXON BODY 3 X6039A5AT 2020-05-25 20:26:27 -050 AXON BODY 3 X6039A5Z7 2020-05-25 20:27:20 -0500 AXON BODY 3 X6039A5Z7 2020-05-25 20:27:45 -0500 AXON BODY 3 X6039A5AT

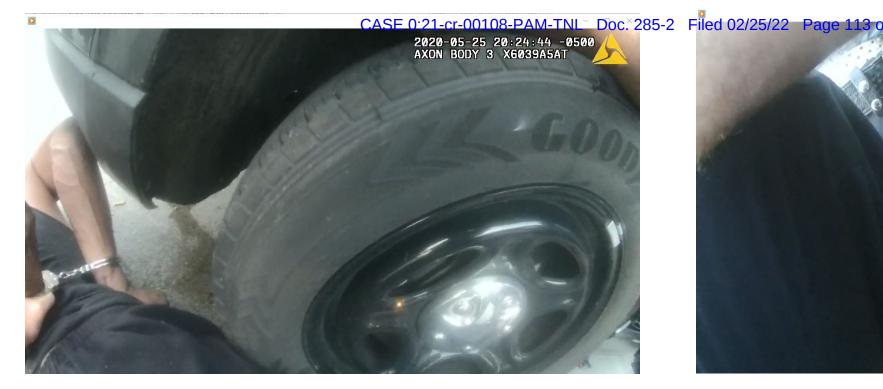
Kueng knew that George Floyd had a serious medical need: GE 5 & 7 Images after "passing out" Incl pulse checks

19:49 및 ♡ ■ ◀◀ ▶▶▶ ♦>>

CLIP GE 7: 20:24:40 - 20:24:50



Kueng knew that George Floyd had a serious medical need : GE 7 & 7A at 20:23:48 (TL asked about rolling Mr. Floyd on his side)





20:24:44	AF	He's about to pass out.
(00:16:47)		
	TL	Yeah I think he's passing out. [radio]
	DW	He's fuckin' stopping his breathing right now bro. You think that's cool?
	GF	[soft groan] [radio – continues for several seconds]

Kueng knew that George Floyd had a serious medical need: GE 7 & 7A at 20:24:48 (TL says he's passing out after AF says so beginning at 20:24:44).

CLIP GE 7: 20:24:40 - 20:24:50

	GH	Check, check for a pulse please. Check for a pulse.
	DW	Bro are you serious? You gonna just [UI] there with that on his neck, bro?
20:25:50	TL	You got one?
(00:17:54)		
20:25:51	GH	Let me see a pulse.
(00:17:55)		
	DW	Is he breathing right now?
	TT	[UI] having this conversation.
	AF	Handcuffed!
	DW	Check his pulse! Check his pulse! Check his pulse, Thao. [radio] Thao, check his
		pulse.
20:25:59	JK	I can't find one. [radio – several seconds]
(00:18:03)		
	DW	Thao, check his pulse, bro.
	DC	Huh?
	JK	Said I was checkin' for a pulse.
	DW	Bro, check his pulse. Bro you bogus bro! You bogus. Don't do drugs bro? What is
		that? What do you think that is? He so you call what he doin' okay? [radio]
	JK	I can't find one.



Kueng knew that George Floyd had a serious medical need: GE 7 & 7A at 20:25:43-59 (Kueng can't find a pulse).

CLIP GE: 20:25:40 - 20:26:00

CASE 0:21-cr-00108-PAM-TNL Doc. 285-2 Filed 02/2

	GH	Check, check for a pulse please. Check for a pulse.	
	DW	Bro are you serious? You gonna just [UI] there with that on his neck, bro?	
20:25:50	TL	You got one?	
(00:17:54)			
20:25:51	GH	Let me see a pulse.	
(00:17:55)			
	DW	Is he breathing right now?	
	TT	[UI] having this conversation.	
	AF	Handcuffed!	
	DW	Check his pulse! Check his pulse! Check his pulse, Thao. [radio] Thao, check his	
		pulse.	
20:25:59	JK	I can't find one. [radio – several seconds]	
(00:18:03)			
	DW	Thao, check his pulse, bro.	
	DC	Huh?	
	JK	Said I was checkin' for a pulse.	
	DW	Bro, check his pulse. Bro you bogus bro! You bogus. Don't do drugs bro? What is	
		that? What do you think that is? He so you call what he doin' okay? [radio]	
	JK	I can't find one.	





Kueng knew that George Floyd had a serious medical need: GE 5 & 7A at 20:25:43-59 (Kueng again can't find a pulse after second pulse check).

CLIP GE 5: 20:25:50 - 20:26:27

Count 3 2(b) Def Lane knew that George Floyd had a serious medical need

02/285-2 Filed 02/25/22 Page 117 of 212





Def Lane knew that George Floyd had a serious medical need: GE 5 at 20:19:40 & 20:19:54 (Beginning with clear view of neck restraint).

CLIP GE 5: 20:19:35 - 20:19:55

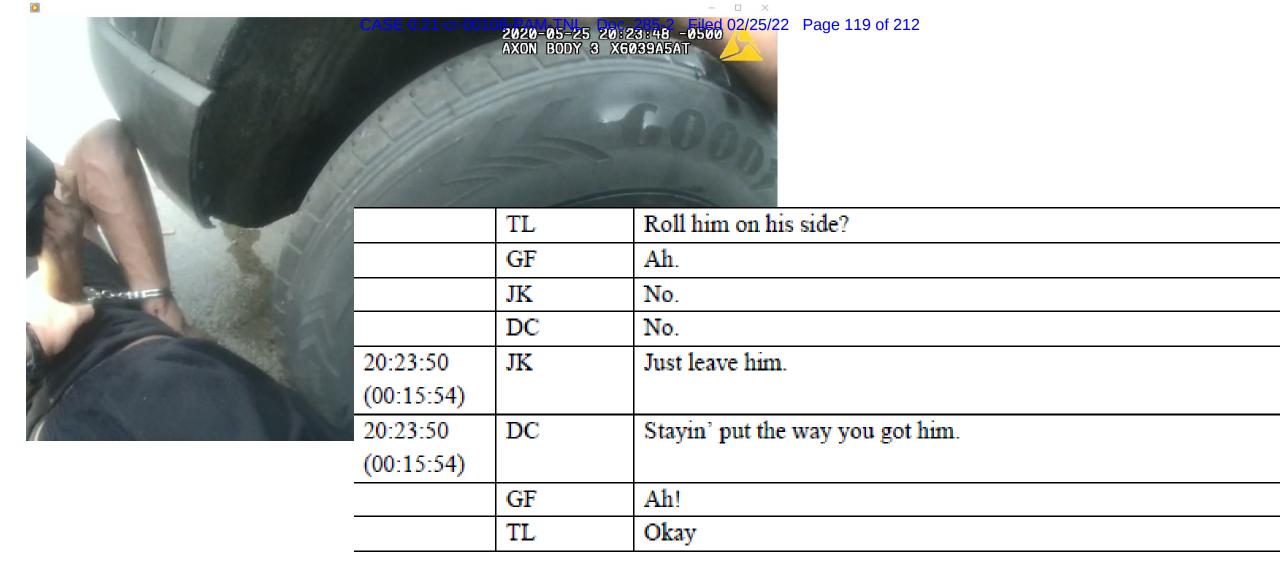
CASE <u>0.0210-078</u>001 <u>0.07-1</u>PAM-TNL <u>Is Die Chi <u>2</u>185n2 <u>on Fillenth <u>0.02</u>/25/22 Page 118 of 212</u></u>

(00:13:02)		
	GF	Oh.
	TL	I'm assuming so.
	GF	Oh.
20:21:00	JK	I believe so. We found a pipe on him. [OV]
(00.13.04)		

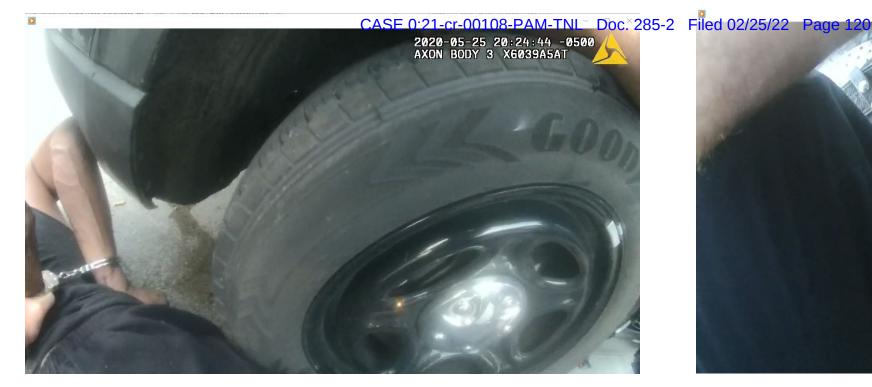


Lane knew that George Floyd had a serious medical need: GE 7 & 7A at 20:25:50-59 (TT asks if he's high on something. TL & JK both respond).

CLIP GE 9: 20:20:57 – 20:21:02



Lane knew that George Floyd had a serious medical need: GE 7 & 7A at 20:23:48 (TL asked about rolling him on his side)

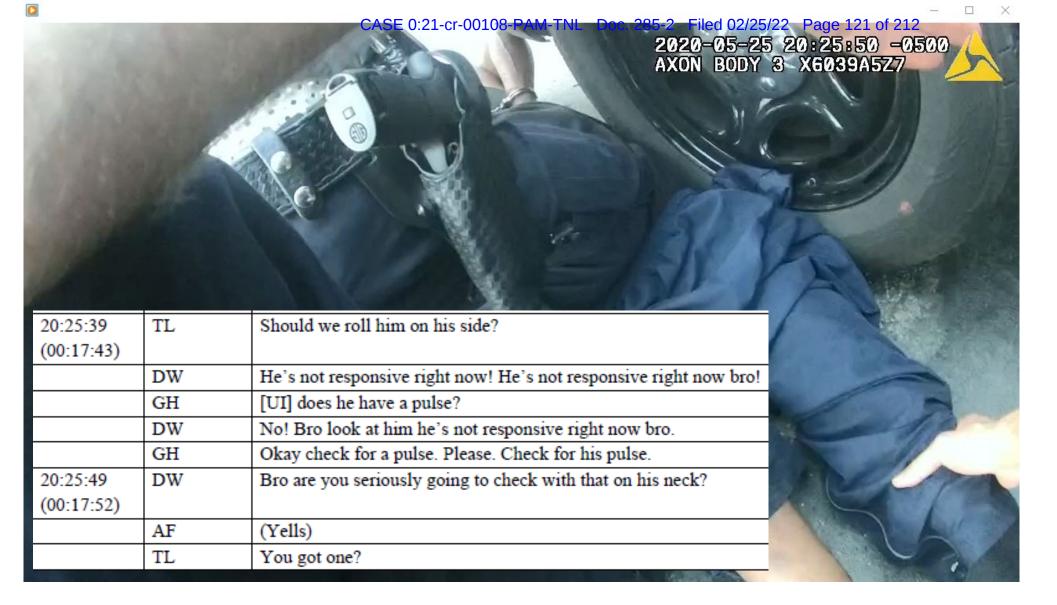




20:24:44	AF	He's about to pass out.
(00:16:47)		
	TL	Yeah I think he's passing out. [radio]
	DW	He's fuckin' stopping his breathing right now bro. You think that's cool?
	GF	[soft groan] [radio – continues for several seconds]

Lane knew that George Floyd had a serious medical need: GE 5/7 & 7A at 20:24:48 (TL says he's passing out after AF says so beginning at 20:24:44).

CLIP GE 7: 20:24:40 - 20:24:50; GE 5 at 20:24:40 - 20:24:50



Lane knew that George Floyd had a serious medical need: GE 5 & 5A at 20:25:39 – 50 (TL asks about rolling Mr. Floyd on his side.)

Clip GE 5 GE 5 20:25:39 – 20:25:50

CASE 0:21-cr-00108-PAM-TNL Doc. 285-2 Filed 02/25/22 Page 122 of 212

	GH	[UI] does he have a pulse?
	DW	No bro look at him! He's not responsive right now, bro!
	GH	Check, check for a pulse please. Check for a pulse.
	DW	Bro are you serious? You gonna just [UI] there with that on his neck, bro?
20:25:50	TL	You got one?
(00:17:54)		
20:25:51	GH	Let me see a pulse.
(00:17:55)		
	DW	Is he breathing right now?
	TT	[UI] having this conversation.
	AF	Handcuffed!
	DW	Check his pulse! Check his pulse! Check his pulse, Thao. [radio] Thao, check his
		pulse.
20:25:59	JK	I can't find one. [radio – several seconds]
(00:18:03)		



Lane knew that George Floyd had a serious medical need : GE 7 & 7A at 20:25:50-59 (Kueng says he can't find a pulse).

CLIP GE <u>5</u>: 20:25:40 – 20:26:00



Lane knew that George Floyd had a serious medical need: GE 5 at 20:26:27 & 20:27:20 (Kueng again says he can't find a pulse).

CLIP GE 5: 20:26:25 – 20:27:20

Count 3 2(c) Thao disregarded that medical need by failing to take reasonable measures to address



	TT	What are you- what are you on?
20:21:53 (5:15)	GF	I can't breathe! Please, the knee on my neck. I can't breathe shit. Uh ah.

Thao failed to take reasonable measures: GE 9 & GE 9A at 20:21:48 – 20:22:00

Clip 20:21:50 – 20:22:00.



8:22

8:23

Thao failed to take reasonable measures: GE 9 & GE 9A at 20:21:48 – 20:22:00

Clip 20:21:50 – 20:22:00.



CUP FOODS

Fresh Meat of Produce

TAME ALT PROMISE ACCESSORIS BUS CARD, SEARING MILL THIRTY SEAR FOOD MALL MAY

Milestone

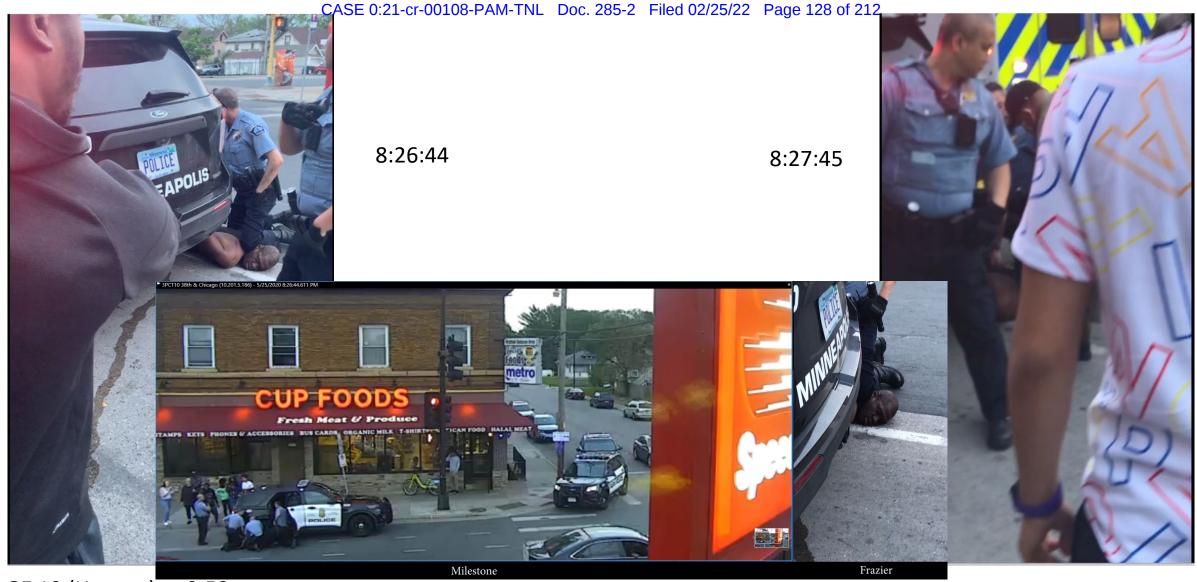
Frazier

Thao failed to take reasonable measures: GE 9 & GE 9A at 20:21:48 – 20:22:00

Clip 20:21:50 – 20:22:00.

8:24

8:25



GE 19 (Hanson) at 2:59

GE 20 (Funari) at 1:52

20	Q. And based on your review of the video evidence in this
21	case, what, if any, medical care did you see any officer
22	provide to George Floyd before Mr. Floyd was loaded into the
23	ambulance?
24	A. I did not see any.

Thao failed to take reasonable measures: Tr. at 1709 (Dr. Systrom testimony)

```
Q. In your review of the video, what medical intervention,
if any, was offered to Mr. Floyd before he was placed in the
ambulance?

A. None.
```

Thao failed to take reasonable measures: Tr. at 2173 (Dr. Bebarta testimony)

CASE 0:21-cr-00108-PAM-TNL Doc. 285-2 Filed 02/25/22 Page 131 of 212

Q. All right. Now, beginning with Mr. Thao, do you have an opinion as to whether Mr. Thao's conduct was consistent or inconsistent with the duty to provide medical aid?

A. I think it was inconsistent as well.

Q. Why is that?

[2/14/2022] 2022-02-14_21cr108 Vol XV

2829

A. Because he didn't do anything.

Thao failed to take reasonable measures: Tr. at 2828-29 (Chief Longo testimony)

Count 3 2(c) Kueng disregarded that medical need by failing to take reasonable measures to address

	GH	Check, check for a pulse please. Check for a pulse.
	DW	Bro are you serious? You gonna just [UI] there with that on his neck, bro?
20:25:50	TL	You got one?
(00:17:54)		
20:25:51	GH	Let me see a pulse.
(00:17:55)		
	DW	Is he breathing right now?
	TT	[UI] having this conversation.
	AF	Handcuffed!
	DW	Check his pulse! Check his pulse! Check his pulse, Thao. [radio] Thao, check his
		pulse.
20:25:59	JK	I can't find one. [radio – several seconds]
(00:18:03)		
	DW	Thao, check his pulse, bro.
	DC	Huh?
	JK	Said I was checkin' for a pulse.
	DW	Bro, check his pulse. Bro you bogus bro! You bogus. Don't do drugs bro? What is
		that? What do you think that is? He so you call what he doin' okay? [radio]
	JK	I can't find one.



Def Kueng failed to take reasonable measures: GE 7

CLIP GE 7: 20:25:40 - 20:26:00

CASE 0:21-cr-00108-PAM-TNL Doc. 285-2 Filed 02/2

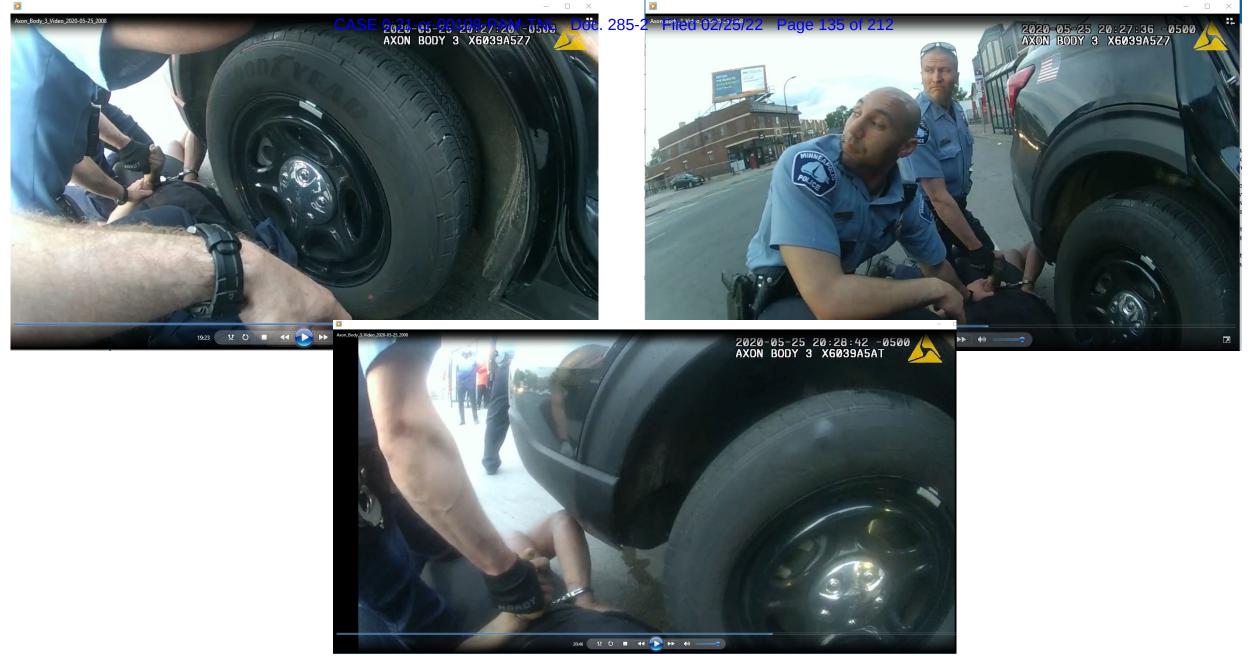
	GH	Check, check for a pulse please. Check for a pulse.	
	DW	Bro are you serious? You gonna just [UI] there with that on his neck, bro?	
20:25:50	TL	You got one?	
(00:17:54)			
20:25:51	GH	Let me see a pulse.	
(00:17:55)			
	DW	Is he breathing right now?	
	TT	[UI] having this conversation.	
	AF	Handcuffed!	
	DW	Check his pulse! Check his pulse! Check his pulse, Thao. [radio] Thao, check his	
		pulse.	
20:25:59	JK	I can't find one. [radio – several seconds]	
(00:18:03)			
	DW	Thao, check his pulse, bro.	
	DC	Huh?	
	JK	Said I was checkin' for a pulse.	
	DW	Bro, check his pulse. Bro you bogus bro! You bogus. Don't do drugs bro? What is	
		that? What do you think that is? He so you call what he doin' okay? [radio]	
	JK	I can't find one.	





Kueng failed to take reasonable measures: GE 5

CLIP GE 5: 20:25:50 - 20:26:27



Kueng failed to take reasonable measures: GE 5

20	Q. And based on your review of the video evidence in this
21	case, what, if any, medical care did you see any officer
22	provide to George Floyd before Mr. Floyd was loaded into the
23	ambulance?
24	A. I did not see any.

Kueng failed to take reasonable measures: Tr. at 1709 (Dr. Systrom testimony)

```
Q. In your review of the video, what medical intervention,
if any, was offered to Mr. Floyd before he was placed in the
ambulance?

A. None.
```

Kueng failed to take reasonable measures: Tr. at 2173 (Dr. Bebarta testimony)

- Q. The clip that we've discussed or that we've watched thus 5 6 far up to this 20:22 and 30 seconds, is what you've seen and heard consistent or inconsistent with MPD policies and 7 8 medical training at least with regard to Mr. Kueng? 9 A. Inconsistent. 10 Why? Ο. 11
- A. Because once you're gaining compliance of that person putting them on to their side, if he's articulating that he's having trouble breathing, then you need to fix that.

Kueng failed to take reasonable measures: Tr. at 1896 (Ofc. MacKenzie testimony)

```
10
      Q. And what is your opinion about whether Mr. Kueng's
      conduct was consistent or inconsistent with the duty to
11
12
      provide medical aid?
13
      A. I think it was contrary to generally accepted policing
14
      practices.
15
      Q. Why is that?
      A. Again, because he did not take any steps to -- other
16
17
      than to check pulse, which is not rendering medical aid,
18
      it's part of the assessment process, other than that, he
      didn't take any other steps to provide any type of medical
19
      attention to Mr. Floyd.
20
```

Kueng failed to take reasonable measures: Tr. at 2829 (Chief Longo testimony)

Count 3 2(c) Lane disregarded that medical need by failing to take reasonable measures to address



	TT	What are you- what are you on?
20:21:53	GF	I can't breathe! Please, the knee on my neck. I can't breathe shit. Uh ah.

Lane failed to take reasonable measures: GE 9 & GE 9A at 20:21:48 – 20:22:00

Clip 20:21:50 – 20:22:00.



Lane failed to take reasonable measures: GE 5

CLIP GE 5: 20:26:25 - 20:27:20

20	Q. And based on your review of the video evidence in this	
21	case, what, if any, medical care did you see any officer	
22	provide to George Floyd before Mr. Floyd was loaded into the	
23	ambulance?	
24	A. I did not see any.	

Lane failed to take reasonable measures: Tr. at 1709 (Dr. Systrom testimony)

```
Q. In your review of the video, what medical intervention,
if any, was offered to Mr. Floyd before he was placed in the
ambulance?

A. None.
```

Lane failed to take reasonable measures: Tr. at 2173 (Dr. Bebarta testimony)

CASE 0:21-cr-00108-PAM-TNL Doc. 285-2 Filed 02/25/22 Page 145 of 212

Q. I wanted to ask you a question about pulse checks. On
its own, are, is providing a pulse medical assistance?

A. It's an assessment.

Q. And what do you mean by that?

[2/8/2022] 2022-02-08_21cr108 Vol XI

```
A. Similar -- because that doesn't mean you're actually rendering any sort of aid. That's just an assessment piece.
```

Lane failed to take reasonable measures: Tr. at 1905-06 (Ofc. MacKenzie testimony)

CASE 0:21-cr-00108-PAM-TNL Doc. 285-2 Filed 02/25/22 Page 146 of 212

```
17
      Q. Did you see -- what, if anything, did you see Mr. Lane
      do that was inconsistent with policy and training when
18
      Mr. Floyd was on the ground?
19
                MR. GRAY: Same objection.
20
                THE COURT: Overruled.
21
22
                THE WITNESS: Well, he didn't follow our policy
23
      and our procedure by intervening, you know, to render first
24
      aid. He didn't put Mr. Floyd in a recovery position.
25
      Mr. Floyd was handcuffed by him and his partner, and they
```

[2/10/2022] 2022-02-10_21cr108 Vol XIII

```
2532

should have taken care of the person they had in custody and

it's that simple.
```

Lane failed to take reasonable measures: Tr. at 2531-32 (Lt. Zimmerman testimony)

- 6 Q. What, if anything, did Mr. Lane do to provide aid to
- 7 Mr. Floyd when he was on the ground?
- 8 A. Nothing.

Lane failed to take reasonable measures: Tr. at 2531 (Lt. Zimmerman testimony)

```
5
      Q. What is your opinion about whether Mr. Lane's conduct
      was consistent or inconsistent with the duty to provide
 6
      medical aid?
 7
     A. Contrary to generally accepted policing practices.
 8
      Q. And why is that?
 9
10
     A. For the same reasons. Officer Lane took no steps to
      provide medical care while Mr. --
11
                MR. GRAY: Objection. [Inaudible]. Move it be
12
13
      stricken.
14
                COURT REPORTER: Could you repeat that?
                THE COURT: It's overruled.
15
```

Lane failed to take reasonable measures: Tr. at 2830 (Chief Longo testimony)

Q. Okay. And providing care prior to that, you testified that the paramedic checking his carotid artery to see if he had a pulse was also providing care?

A. That's actually assessing for a pulse, not providing care.

Lane failed to take reasonable measures: Tr. at 2278 (Dr. Bebarta testimony on cross-examination)

```
THE WITNESS: Well, suggesting rendering aid and
actually rendering aid are two very different things.
BY MR. SLAUGHTER:
Q. So what do you mean by that?
    Just merely offering a suggestion will not pump blood
throughout your system.
```

Lane failed to take reasonable measures: Tr. at 2052 (Ofc. MacKenzie testimony))

- Q. And is there any decline in chances of resuscitation
 that can be measured minute by minute after cardiac arrest?

 A. About a ten percent fall per minute.

 Q. A ten percent fall in chances of survival?

 A. Yes.
 - Q. About how long did you observe Mr. Floyd being
- 9 restrained following the onset of his cardiac arrest?
- 10 A. About three minutes.

Lane failed to take reasonable measures: Tr. at 1708 (Dr. Systrom testimony)

12	Q. And I think you well, I want to make sure I've asked
13	you. What are officers trained to do if they're unsure
14	after taking a pulse whether or not a person has a pulse?
15	A. If they're unsure, they can ask somebody else to check a
16	pulse, but if they're not getting that pulse within ten
17	seconds, then you immediately begin CPR.

Lane failed to take reasonable measures: Tr. at 1838 (Ofc. MacKenzie testimony)

Count 3 3. Def Thao committed the acts or omissions willfully



	TT	What are you- what are you on?
20:21:53 (5:15)	GF	I can't breathe! Please, the knee on my neck. I can't breathe shit. Uh ah.

Def Thao's failure to take reasonable measures was willful: GE 9 & GE 9A at 20:21:48 – 20:22:00 Clip 20:21:50 – 20:22:00.



8:25:04

8:25:07

Thao's failure to take reasonable measures was willful: GE 9 & GE 21 at 20:24:04 & 07 (TT facing and has full perspective of neck restraint)

POLICY & PROCEDURE MANUAL
I understand that I am accountable for knowing and abiding by all policies and procedures contained within the Minneapolis Police Department Policy and Procedure Manual and that I will be held accountable for abiding by the policies and procedures contained therein.
I have read the instructions and understand how to access the online electronic version of the Minneapolis Police Department Policy and Procedure Manual.
If you do not understand how to access the online manual, see your immediate supervisor for fraining until you are able to successfully access the online manual.
NAME: Tou THAO (Please print)
SIGNED:
BADGE/EMPLOYEE #: 007/62
DATE: 1-17-2012
SIGNATURE AND RETURN OF THIS RECEIPT IS MANDATORY

II. POLICY

- A. MPD employees shall request emergency medical services (EMS) as soon as practical if any employee has come into contact with an individual having an acute medical crisis and any delay in treatment could potentially aggravate the severity of the medical crisis, or as otherwise required by policy.
 - While awaiting EMS, MPD employees assisting an individual having an acute medical crisis shall provide any necessary first aid consistent with MPD training, as soon as practical.

5-306 USE OF FORCE – REPORTING AND POST INCIDENT REQUIREMENTS (08/17/07)

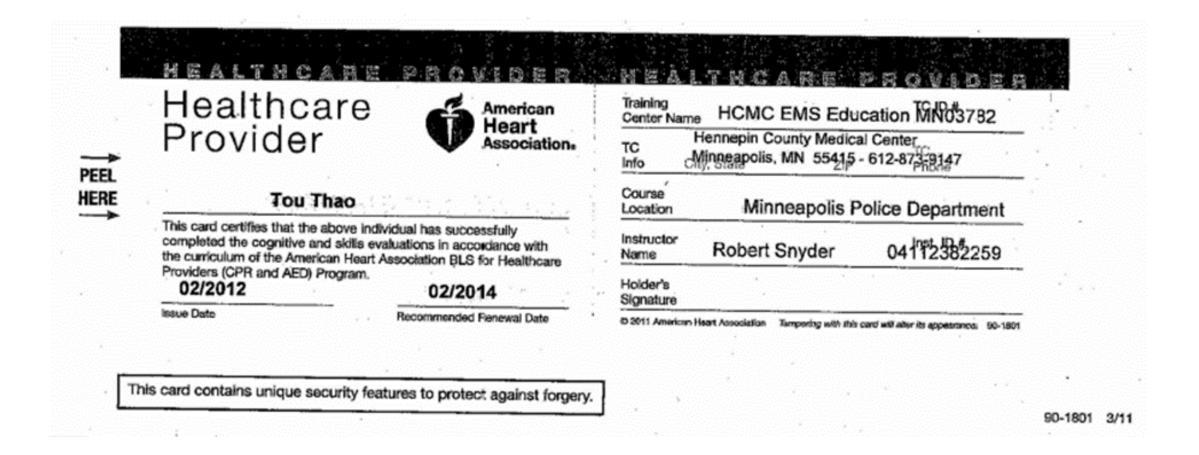
Any sworn MPD employee who uses force shall comply with the following requirements:

Medical Assistance: As soon as reasonably practical, determine if anyone was injured and render medical aid consistent with training and request Emergency Medical Service (EMS) if necessary.

Side Recovery Position: Placing a restrained subject on their side in order to reduce pressure on his/her chest and facilitate breathing.

Thao's failure to take reasonable measures was willful: GE 46 at 5-316 III (definitions)

WorkForce Director Page 1 of 6 **Training Records** Training History for: Tou Thao Employee Id: 007162 **Total Continued Education Credits: 1014.0 Total Instructor Credits: 0.0** Add (Add training that are not associated with an existing Event/TimeSlot) Continued Instructor Make Model # Commer Start End Course Grade Date Date Credits 2020 Annual Semi-Automatic Handgun and Gas Mask Fit Testing, Janaury - February, Edit Delete Multiple dates 2/6/2020 2/6/2020 PASS 1.00 2019 Annual In-Service Training Program, Phase III, September Edit Delete December 2019 12/3/2019 | 12/3/2019 | Applicable 7.00 2019 Annual In-Service Training Program, Phase III, September Edit Delete December 2019 12/2/2019 | 12/2/2019 | Applicable 7.00 2019 Annual In-Service Training Program, Phase II, (Apr-Aug/Sep Edit Delete 25-26) 6/13/2019 6/13/2019 Applicable 7.00 2019 Annual In-Service Training Program, Phase II, (Apr-Aug/Sep Edit Delete 25-26) 6/12/2019 6/12/2019 Applicable 7.00



WorkForce Director Page 1 of 6 **Training Records** Training History for: Tou Thao Employee Id: 007162 **Total Continued Education Credits: 1014.0 Total Instructor Credits: 0.0** Add (Add training that are not associated with an existing Event/TimeSlot) Continued Instructor Make Model # Commer Start End Course Grade Date Date Credits 2020 Annual Semi-Automatic Handgun and Gas Mask Fit Testing, Janaury - February, Edit Delete Multiple dates 2/6/2020 2/6/2020 PASS 1.00 2019 Annual In-Service Training Program, Phase III, September Edit Delete December 2019 12/3/2019 | 12/3/2019 | Applicable 7.00 2019 Annual In-Service Training Program, Phase III, September Edit Delete December 2019 12/2/2019 | 12/2/2019 | Applicable 7.00 2019 Annual In-Service Training Program, Phase II, (Apr-Aug/Sep Edit Delete 25-26) 6/13/2019 6/13/2019 Applicable 7.00 2019 Annual In-Service Training Program, Phase II, (Apr-Aug/Sep Edit Delete 25-26) 6/12/2019 6/12/2019 Applicable 7.00

Maximal Restraint Technique (5-316)

Definitions

- Hobble Restraint Device
 - "RIPP Hobble" used to limit movement by tethering legs together
- Maximal Restraint Technique (MRT)
 - Securing feet to waist to prevent movement
 - Limits property damage or injury to self/others
- Prone Position
 - Subject face down
- Side Recovery Position
 - Subject on side while in restraints; reduces chest pressure & helps breathing





MRT - Safety

- Side Recovery Position ASAP
- No Prone Transport

Thao's failure to take reasonable measures was willful: GE 61 and 63 (same at 53310, 53325)

MINNEAPOLIS POLICE DEPARTS BY ORDER OF THE CHIEF OF PO ADMINISTRAT			
DATE ISSUED:	DATE EFFECTIVE:	NUMBER:	PAGE:
April 23, 2012	April 23, 2012	AA12-011	1 of 1
ISSUED BY	l:		
Lt. Todd Gross Director of Tr			
то:			RETENTION DATE:
Minneapolis Police Departmen	Until Rescinded		
SUBJECT:			APPROVED BY:
Positional Asphyxiation training	g video		TG

MP-3407

A training video on Positional Asphyxiation has been posted on the MPD Training unit website for officers to review. This video serves as a reminder that whenever a subject is restrained, there is a direct correlation between their ability to breathe and the position their body is in.

Supervisors: Please show this video at roll call.

The video can be found on the MPD Training Unit webpage or by CTRL+clicking the following link: <u>Positional Asphyxia training video</u>

Thao's failure to take reasonable measures was willful: GE 75

Positional Asphyxia video: GE 76



ADULT CPR AIRWAY- Open with Head Tilt Chin Lift BREATHING- Check for breathing or Agonal respirations (anything not normal) CIRCULATION- Check for a Carotid Pulse If NO Pulse, request Rescue and Ambulance START CPR US001 00043098

Count 3 3. Def Kueng committed the acts or omissions willfully

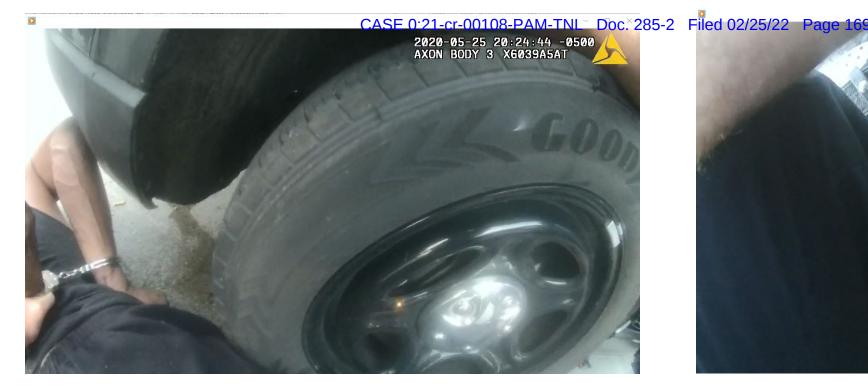
CASE <u>0.0210-078</u>001 <u>0.07-1</u>PAM-TNL <u>Is Die Chi <u>2</u>185n2 <u>on Fillenth <u>0.02</u>/25/22 Page 168 of 212</u></u>

(00:13:02)		
	GF	Oh.
	TL	I'm assuming so.
	GF	Oh.
20:21:00	JK	I believe so. We found a pipe on him. [OV]
(00.13.04)		



Kueng's failure to take reasonable measures was willful.

CLIP GE 9: 20:20:57 - 20:21:02





20:24:44	AF	He's about to pass out.
(00:16:47)		
	TL	Yeah I think he's passing out. [radio]
	DW	He's fuckin' stopping his breathing right now bro. You think that's cool?
	GF	[soft groan] [radio – continues for several seconds]

Kueng's failure to take reasonable measures was willful: GE 7 & 7A at 20:24:48.

CLIP GE 7: 20:24:40 - 20:24:50

CASE 0:21-cr-00108-PAM-TNL Doc. 285-2 Filed 02/25/22 Page 170 of 212

	GH	[UI] does he have a pulse?
	DW	No bro look at him! He's not responsive right now, bro!
	GH	Check, check for a pulse please. Check for a pulse.
	DW	Bro are you serious? You gonna just [UI] there with that on his neck, bro?
20:25:50	TL	You got one?
(00:17:54)		
20:25:51	GH	Let me see a pulse.
(00:17:55)		
	DW	Is he breathing right now?
	TT	[UI] having this conversation.
	AF	Handcuffed!
	DW	Check his pulse! Check his pulse! Check his pulse, Thao. [radio] Thao, check his
		pulse.
20:25:59	JK	I can't find one. [radio – several seconds]
(00:18:03)		



Kueng's failure to take reasonable measures was willful: GE 7 & 7A at 20:25:50-59 (Kueng can't find a pulse)

CLIP GE 7: 20:25:50 - 20:26:00

POLICY & PROCEDURE MANUAL

I understand that I am accountable for knowing and abiding by all policies and procedures contained within the Minneapolis Police Department Policy and Procedure Manual and that I will be held accountable for abiding by the policies and procedures contained therein.

I have read the instructions and understand how to access the online electronic version of the Minneapolis Police Department Policy and Procedure Manual.

If you do not understand how to access the online manual, see your immediate supervisor for training until you are able to successfully access the online manual.

NAME: T. Alexander Kueng

(Please print)

SIGNED: J. DWE

BADGE/EMPLOYEE #: 3897

DATE: 2

2/7/2019

SIGNATURE AND RETURN OF THIS RECEIPT IS MANDATORY

II. POLICY

- A. MPD employees shall request emergency medical services (EMS) as soon as practical if any employee has come into contact with an individual having an acute medical crisis and any delay in treatment could potentially aggravate the severity of the medical crisis, or as otherwise required by policy.
 - While awaiting EMS, MPD employees assisting an individual having an acute medical crisis shall provide any necessary first aid consistent with MPD training, as soon as practical.

5-306 USE OF FORCE – REPORTING AND POST INCIDENT REQUIREMENTS (08/17/07)

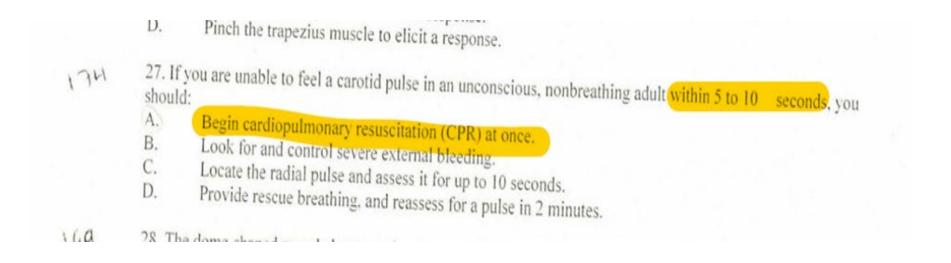
Any sworn MPD employee who uses force shall comply with the following requirements:

Medical Assistance: As soon as reasonably practical, determine if anyone was injured and render medical aid consistent with training and request Emergency Medical Service (EMS) if necessary.

Side Recovery Position: Placing a restrained subject on their side in order to reduce pressure on his/her chest and facilitate breathing.

Kueng's failure to take reasonable measures was willful: GE 46 at 5-316 III (definitions)

	Total	Continued E		redits: 30.0	eng 897	ing Recor	rds				
	Add	(Add trainin	ng that are	not associ	ated with	an existing E	vent/TimeSk	ot)			
		Course	Start Date	End Date	Grade	Continued Education Credits	Instructor Credits	Make	Model	Serial	Comment
60	it Dele	2020 Annu In-Service Training Program, Phase I, January - April, Multiple Bottco		2/11/202	Not Applicati	e 7.00					
Edi	it Delet	2020 Annua In-Service Training Program, Phase I, January - April, Multiple Dates	hi		Not Applicable						
Ede	Deleti	2020 Annua Semi- Automatic Handgun and Gas Mask Fit Testing, Janaury- February, Multiple				1.00					
	Defete	2019 X-CEL Energy Active Shooter Exercise, December	-		Not						
Edit	Delete		12/12/2019	12/12/2019	Not Applicable	0.00					**Academy
Edit	Delete		11/4/2019	11/5/2019	Not Applicable	0.00					**Academy
	Delete	2019 Introduction to PIMS for Cadets (Aug 19-22)	8/19/2019	8/22/2019	Not Applicable	0.00					*Academy
Edit	Delete	2018 PIMS Basic Training-	5/22/2018	5/22/2018	Not Applicable	8.00					GOVER



- 5. While functioning at the scene of a patient in cardiac arrest, you do not initiate cardiopulmonary resuscitation (CPR) because the patient is elderly and you think that he is probably dead. Paramedics arrive and determine that the patient has only been in cardiac arrest for 6 minutes. Which of the following statements regarding this scenario is correct?
 - A. As an EMR, you did not have a legal duty to begin CPR.
 - B. The patient would most likely not be able to be resuscitated.
 - C. Your actions are consistent with the responsibilities of an LER.
 - You may be held liable for failure to follow the standard of care.

*Side Recovery Position: Placing a restrained subject on their side in order to reduce pressure on his/her chest and facilitate breathing

Test of Proportionality

- Neck Restraints (conscious or unconscious applications) shall only be used against subjects when lower force
 options either:
- Have failed,
- Will likely fail, or
- Are too dangerous to attempt
- Neck Restraints shall not be used against persons who are only displaying Passive Resistance as defined by policy. Test of Proportionality
- If unconsciousness occurred, request EMS immediately by radio
- Loosen clothing & jewelry around the SUB's neck area
- Check airway & breathing start CPR if needed

After a Neck Restraint has been applied, you shall keep them under close observation until they are released to medical or other law enforcement personnel.

Transfer of Custody

- Prior to transferring custody of a subject that force was used upon, you shall verbally notify the receiving agency or employee of:
- The type of force used,
- Any injuries sustained (real or alleged) and

Prone Position: For purposes of this policy, the term Prone Position means to lay a restrained subject face down on their chest.

Side Recovery Position: Placing a restrained subject on their side in order to reduce pressure on his/her chest and facilitate breathing.

Ok they are in handcuffs now what. Sudden cardiac arrest typically occurs immediately following a violent struggle •Place the subject in the recovery position to alleviate positional asphyxia •Once in handcuffs, get EMS on scene quickly to monitor and transport ·Sign a transport hold on these individuals Complete a CIC report US001 T 00003747

bandage. E. Trauma bandage. F. Hemostatic agent.

Recovery Position

When a patient is unconscious, the tongue can easily fall back into the oropharynx and become an obstruction to the ability to breathe. The LER may arrange the body and limbs of a patient in an effort to maintain the patency of that patient's airway. The recovery position relies on gravity to move the tongue away from the back of the airway and to assist in clearing the airway of obstructions (Figure 3). By placing the patient on his or her side, the patient's downside arm supports the head, allowing the jaw to hang open and the tongue to be pulled forward and down. The downside leg is generally straightened and the leg on top is bent 90 degrees, allowing the hips to rotate slightly forward. This allows fluids to drain from the nose and face; it also keeps the tongue from becoming an obstruction.

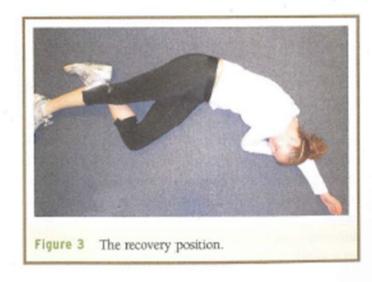
The recovery position is not recommended in cases where a patient has possibly sustained an injury to any level of the spine. Moving such patients may result in further insult to the spinal cord. In such instances, the LER may need to defer any positioning to emergency personnel trained in spinal immobilization.

MEDICAL LOGISTICAL SUPPORT

Communication

A basic tenet of real estate is "location, location, location."

This is also true of police work. Most officers, after graduating from the police academy, will go to field training under a more experienced officer. Knowing your location at all times is



Kueng's failure to take reasonable measures was willful: GE 83 at 5

Ethical and Legal Considerations

ETHICS

LERs are bound by ethical and legal duties to provide care. Ethics are the standards that societies, organizations, and professions establish to define expectations for members of that group. They broadly define right from wrong and create expectations of appropriate behavior. Laws, regulations, and policies are used to define ethical behavior more clearly and to impose sanctions for wrongful actions. Applied ethics is the use of these ethical values. All persons are governed by their own morals, that is, their personal sense of right and wrong. LERs need to internalize the ethical guidelines established by their professional group and use them as the foundation

for making decisions relative to integrity. Common decisionmaking models promote the foundations of doing no harm to the patient, acting in good faith, and performing your duties in the patient's best interest.

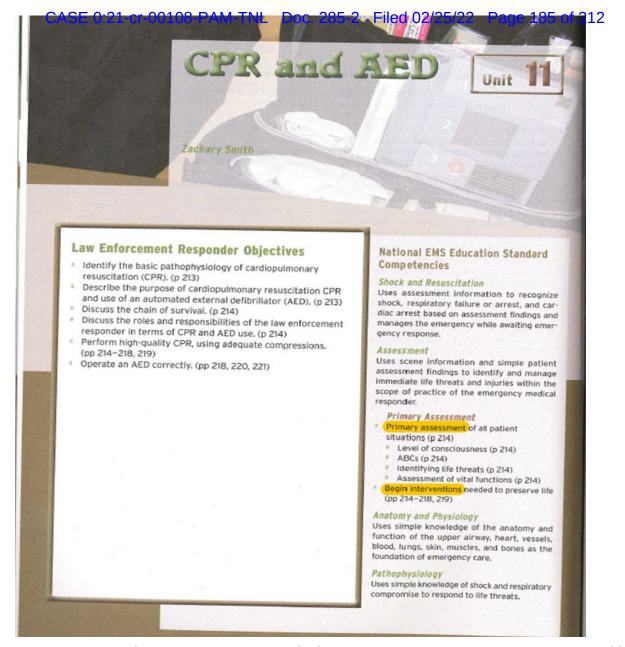
LERs should work to maintain the trust of those they serve. Providing impartial aid, honest answers, and professional conduct leads to public acceptance. Examples of general unethical behavior include falsifying documentation, lying or misrepresenting information to patients or coworkers, routinely arriving late to assignments, and avoiding duties and responsibilities that impose additional demands on coworkers. A LER is held in high esteem by the public. Poor ethical

Kueng's failure to take reasonable measures was willful: GE 83 at 40

DUTY TO ACT

A <u>duty to act</u> arises when a responder becomes responsible to the public for rendering aid during a medical emergency. This duty to act is an implied social contract between the person rendering aid and others in society. Police officers, fire fighters, and EMS personnel generally have a duty to provide care because their job includes the provision of emergency medical care within the community (Figure 6). When called to assist someone needing medical care, emergency responders are expected to act in a manner consistent with the standard of care. LERs should clarify their agencies' and states' stance relative to their assignment. In some cases, the duty to act may conflict with protection, surveillance, or other law enforcement duties.

Kueng's failure to take reasonable measures was willful: GE 83 at 41







MINNEAPOLIS POLICE DEPARTMENT
OPERATIONS SECTION

NUMBER:
5-100
DATE:
18 HINE 2018

5-101.01 TRUTHFULNESS (01/26/05) (11/15/13)

The integrity of police service is based on truthfulness. Officers shall not willfully or knowingly make an untruthful statement, verbally or written, or knowingly omit pertinent information pertaining to his/her official duty as a Minneapolis Police Officer.

applicable State and Federal law. All employees of the Minneapolis Police Department are required

MPD employees shall not willfully or knowingly make an untruthful statement or knowingly omit pertinent information in the presence of any supervisor, intended for the information of any supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation. (12/14/07)

supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation.

These requirements apply to any report, whether verbal or written, concerning official MPD business including, but not limited to, written reports, transmissions to MECC and officers via radio, telephone, pager, e-mail or MDC.

GOVERNMENT EXHIBIT 45 21-α-108 (PAM/TNL) 00005950







5-101.01 TRUTHFULNESS (01/26/05) (11/15/13)

The integrity of police service is based on truthfulness. Officers shall not willfully or knowingly make an untruthful statement, verbally or written, or knowingly omit pertinent information pertaining to his/her official duty as a Minneapolis Police Officer.

applicable State and Federal law. All employees of the Minneapolis Police Department are required

MPD employees shall not willfully or knowingly make an untruthful statement or knowingly omit pertinent information in the presence of any supervisor, intended for the information of any supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation. (12/14/07)

supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation.

These requirements apply to any report, whether verbal or written, concerning official MPD business including, but not limited to, written reports, transmissions to MECC and officers via radio, telephone, pager, e-mail or MDC.

GOVERNMENT EXHIBIT 45 21-cr-108 (PAM/TNL) 00005950





MINNEAPOLIS POLICE DEPARTMENT OPERATIONS SECTION NUMBER: 5-100 DATE: 18 HINE 2018

5-101.01 TRUTHFULNESS (01/26/05) (11/15/13)

The integrity of police service is based on truthfulness. Officers shall not willfully or knowingly make an untruthful statement, verbally or written, or knowingly omit pertinent information pertaining to his/her official duty as a Minneapolis Police Officer.

applicable State and Federal law. All employees of the Minneapolis Police Department are required

MPD employees shall not willfully or knowingly make an untruthful statement or knowingly omit pertinent information in the presence of any supervisor, intended for the information of any supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation. (12/14/07)

supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation.

These requirements apply to any report, whether verbal or written, concerning official MPD business including, but not limited to, written reports, transmissions to MECC and officers via radio, telephone, pager, e-mail or MDC.

GOVERNMENT EXHIBIT

45
21-cr-108 (PAM/TNL)

00005950

Count 3 3. Def Lane committed the acts or omissions willfully

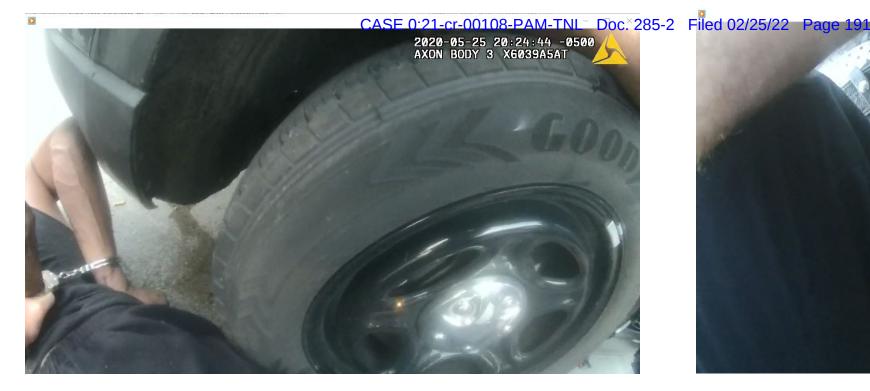
CASE <u>0.0210</u>cr800100-PAM-TNL Is <u>Die Grig 285n 2 on Field th 0.02</u>/25/22 Page 190 of 212

(00:13:02)		
	GF	Oh.
	TL	I'm assuming so.
	GF	Oh.
20:21:00	JK	I believe so. We found a pipe on him. [OV]
(00.13.04)		



Lane's failure to take reasonable measures was willful.

CLIP GE 9: 20:20:57 - 20:21:02





20:24:44	AF	He's about to pass out.
(00:16:47)		
	TL	Yeah I think he's passing out. [radio]
	DW	He's fuckin' stopping his breathing right now bro. You think that's cool?
	GF	[soft groan] [radio – continues for several seconds]

Lane's failure to take reasonable measures was willful: GE 7 & 7A at 20:24:48.

CASE 0:21-cr-00108-PAM-TNL Doc. 285-2 Filed 02/25/22 Page 192 of 212

	GH	[UI] does he have a pulse?	
	DW	No bro look at him! He's not responsive right now, bro!	
	GH	Check, check for a pulse please. Check for a pulse.	
	DW	Bro are you serious? You gonna just [UI] there with that on his neck, bro?	
20:25:50	TL	You got one?	
(00:17:54)			
20:25:51	GH	Let me see a pulse.	
(00:17:55)			
	DW	Is he breathing right now?	
	TT	[UI] having this conversation.	
	AF	Handcuffed!	
	DW	Check his pulse! Check his pulse! Check his pulse, Thao. [radio] Thao, check his	
		pulse.	
20:25:59	JK	I can't find one. [radio – several seconds]	
(00:18:03)			

Lane's failure to take reasonable measures was willful: GE 7 & 7A at 20:25:50-59 (Kueng can't find a pulse)

POLICY & PROCEDURE MANUAL

I understand that I am accountable for knowing and abiding by all policies and procedures contained within the Minneapolis Police Department Policy and Procedure Manual and that I will be held accountable for abiding by the policies and procedures contained therein.

I have read the instructions and understand how to access the online electronic version of the Minneapolis Police Department Policy and Procedure Manual.

If you do not understand how to access the online manual, see your immediate supervisor for training until you are able to successfully access the online manual.

NAME: Thomas Kiernan Lane

(Please print)

SIGNED:

BADGE/EMPLOYEE #: Badge # 3951 Employee ID# 003951

DATE: 2-7-19

SIGNATURE AND RETURN OF THIS RECEIPT IS MANDATORY

II. POLICY

- A. MPD employees shall request emergency medical services (EMS) as soon as practical if any employee has come into contact with an individual having an acute medical crisis and any delay in treatment could potentially aggravate the severity of the medical crisis, or as otherwise required by policy.
 - While awaiting EMS, MPD employees assisting an individual having an acute medical crisis shall provide any necessary first aid consistent with MPD training, as soon as practical.

5-306 USE OF FORCE – REPORTING AND POST INCIDENT REQUIREMENTS (08/17/07)

Any sworn MPD employee who uses force shall comply with the following requirements:

Medical Assistance: As soon as reasonably practical, determine if anyone was injured and render medical aid consistent with training and request Emergency Medical Service (EMS) if necessary.

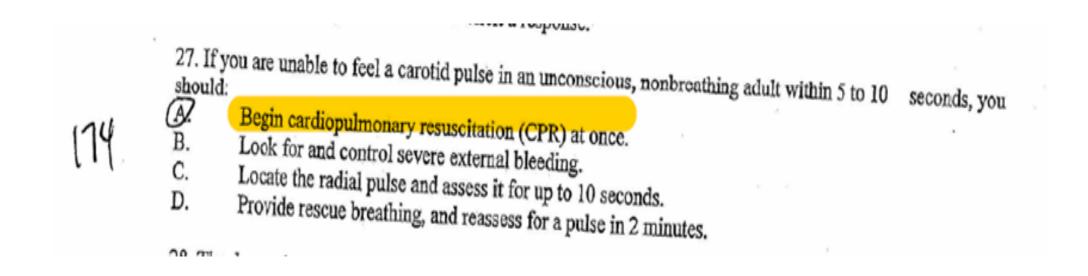
Side Recovery Position: Placing a restrained subject on their side in order to reduce pressure on his/her chest and facilitate breathing.

Lane's failure to take reasonable measures was willful: GE 46 at 5-316 III (definitions)

Training Records

Training History for: Thomas Lane Employee Id: 003951 **Total Continued Education Credits: 22.0 Total Instructor Credits: 0.0** Add (Add training that are not associated with an existing Event/TimeSlot) Continued Instructor Education Credits Make Model # Comment Education Credits Start Course Date 2020 Annu In-Service Training Program, Phase I, January April, Multiple Dates 2/11/2020 2/11/2020 Applicable 7.00 2020 Annu In-Service Training Program, Phase I, January Multiple 2/10/2020 2/10/2020 Applicable 7.00 2020 Annual Semi-Automatic Handgun and Gas Mask Fit Testing, Janaury -February Multiple dates 1/7/2020 1/7/2020 PASS 1.00 2019 X-CEL Energy Shooter Exercise. Edit Delete 14, 2019 12/14/2019 12/14/2019 Applicable 7.00 2019 Procedura Justice III for Cadets Not **Academ (Dec 12) 12/12/2019 12/12/2019 Applicable 2019 SFST Training Program fo Not **Academy Edit Delete 04-05) 11/4/2019 11/5/2019 Applicable 0.00 Course 2019 Introduction **Academy te 19-22) 8/19/2019 8/22/2019 Applicable 0.00 72 http://appwfdprod/wfd/EventManagement/EmployeeTrainingHistory.aspx?header=false&... 5/26/2020 00006912 US001

Lane's failure to take reasonable measures was willful: GE 72



- 5. While functioning at the scene of a patient in cardiac arrest, you do not initiate cardiopulmonary resuscitation (CPR) because the patient is elderly and you think that he is probably dead. Paramedics arrive and determine that the patient has only been in cardiac arrest for 6 minutes. Which of the following statements regarding this scenario is correct?
- As an EMR, you did not have a legal duty to begin CPR.
- The patient would most likely not be able to be resuscitated.
- C. Your actions are consistent with the responsibilities of an LER.
 You may be held liable for failure to follow the standard of care.

*Side Recovery Position: Placing a restrained subject on their side in order to reduce pressure on his/her chest and facilitate breathing

Test of Proportionality

- Neck Restraints (conscious or unconscious applications) shall only be used against subjects when lower force
 options either:
- Have failed,
- Will likely fail, or
- Are too dangerous to attempt
- Neck Restraints shall not be used against persons who are only displaying Passive Resistance as defined by policy. Test of Proportionality
- · If unconsciousness occurred, request EMS immediately by radio
- Loosen clothing & jewelry around the SUB's neck area
- Check airway & breathing start CPR if needed

After a Neck Restraint has been applied, you shall keep them under close observation until they are released to medical or other law enforcement personnel.

Transfer of Custody

- Prior to transferring custody of a subject that force was used upon, you shall verbally notify the receiving agency or employee of:
- The type of force used,
- Any injuries sustained (real or alleged) and

Prone Position: For purposes of this policy, the term Prone Position means to lay a restrained subject face down on their chest.

Side Recovery Position: Placing a restrained subject on their side in order to reduce pressure on his/her chest and facilitate breathing.

Ok they are in handcuffs now what. Sudden cardiac arrest typically occurs immediately following a violent struggle •Place the subject in the recovery position to alleviate positional asphyxia •Once in handcuffs, get EMS on scene quickly to monitor and transport ·Sign a transport hold on these individuals Complete a CIC report US001 T 00003747

bandage. E. Trauma bandage. F. Hemostatic agent.

Recovery Position

When a patient is unconscious, the tongue can easily fall back into the oropharynx and become an obstruction to the ability to breathe. The LER may arrange the body and limbs of a patient in an effort to maintain the patency of that patient's airway. The recovery position relies on gravity to move the tongue away from the back of the airway and to assist in clearing the airway of obstructions (Figure 3). By placing the patient on his or her side, the patient's downside arm supports the head, allowing the jaw to hang open and the tongue to be pulled forward and down. The downside leg is generally straightened and the leg on top is bent 90 degrees, allowing the hips to rotate slightly forward. This allows fluids to drain from the nose and face; it also keeps the tongue from becoming an obstruction.

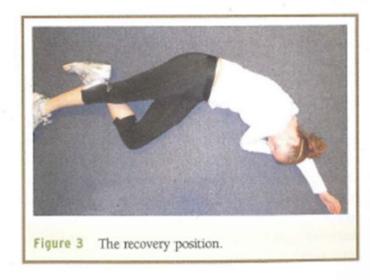
The recovery position is not recommended in cases where a patient has possibly sustained an injury to any level of the spine. Moving such patients may result in further insult to the spinal cord. In such instances, the LER may need to defer any positioning to emergency personnel trained in spinal immobilization.

MEDICAL LOGISTICAL SUPPORT

Communication

A basic tenet of real estate is "location, location, location."

This is also true of police work. Most officers, after graduating from the police academy, will go to field training under a more experienced officer. Knowing your location at all times is



Ethical and Legal Considerations

ETHICS

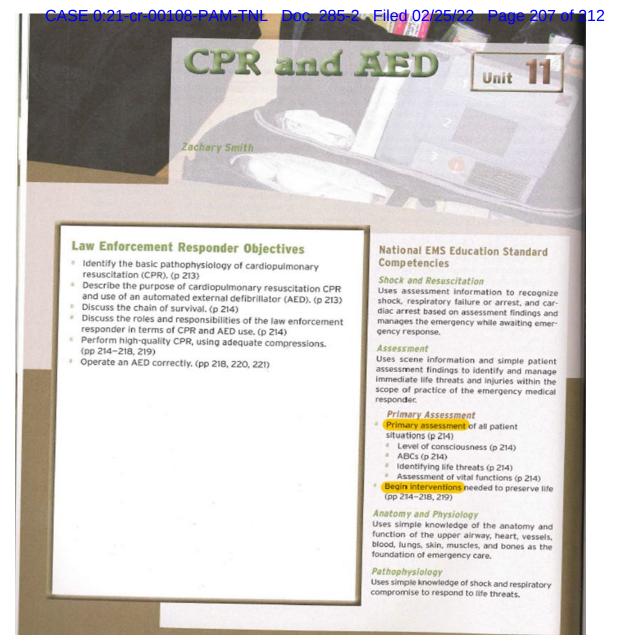
LERs are bound by ethical and legal duties to provide care. Ethics are the standards that societies, organizations, and professions establish to define expectations for members of that group. They broadly define right from wrong and create expectations of appropriate behavior. Laws, regulations, and policies are used to define ethical behavior more clearly and to impose sanctions for wrongful actions. Applied ethics is the use of these ethical values. All persons are governed by their own morals, that is, their personal sense of right and wrong. LERs need to internalize the ethical guidelines established by their professional group and use them as the foundation

for making decisions relative to integrity. Common decisionmaking models promote the foundations of doing no harm to the patient, acting in good faith, and performing your duties in the patient's best interest.

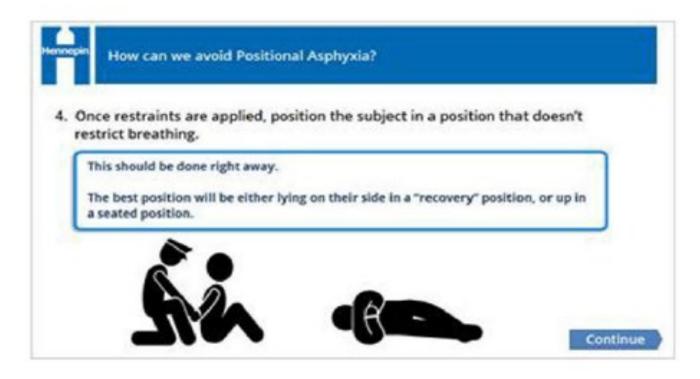
LERs should work to maintain the trust of those they serve. Providing impartial aid, honest answers, and professional conduct leads to public acceptance. Examples of general unethical behavior include falsifying documentation, lying or misrepresenting information to patients or coworkers, routinely arriving late to assignments, and avoiding duties and responsibilities that impose additional demands on coworkers. A LER is held in high esteem by the public. Poor ethical

DUTY TO ACT

A <u>duty to act</u> arises when a responder becomes responsible to the public for rendering aid during a medical emergency. This duty to act is an implied social contract between the person rendering aid and others in society. Police officers, fire fighters, and EMS personnel generally have a duty to provide care because their job includes the provision of emergency medical care within the community (Figure 6). When called to assist someone needing medical care, emergency responders are expected to act in a manner consistent with the standard of care. LERs should clarify their agencies' and states' stance relative to their assignment. In some cases, the duty to act may conflict with protection, surveillance, or other law enforcement duties.



1.11 Untitled Slide

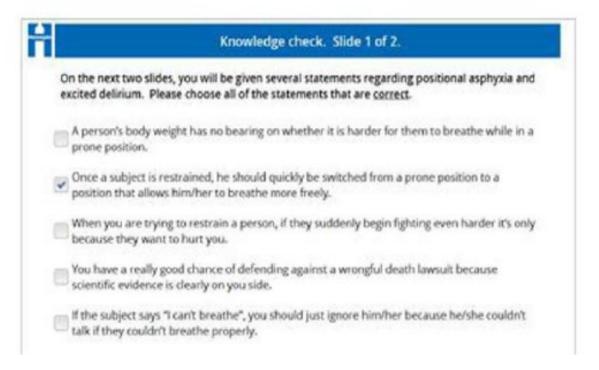


Notes:

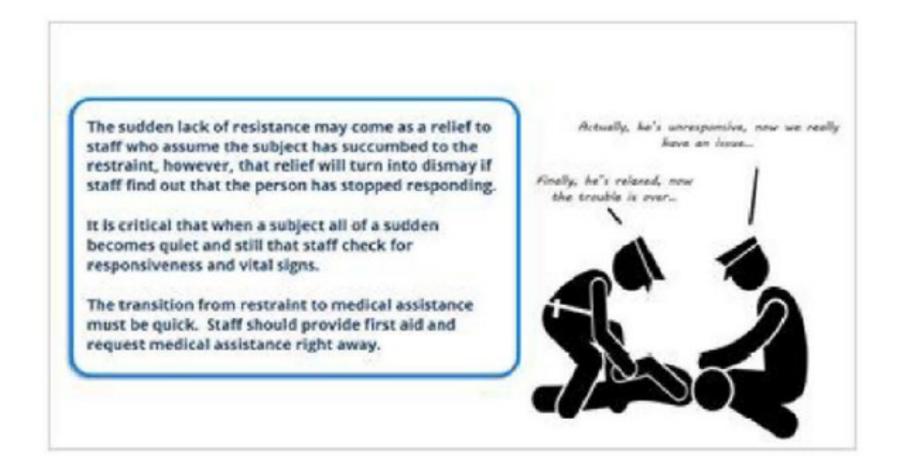
National Institute of Justice Report "Special Panel Review of Excited Delirium". December 2003

1.18 On the next two slides, you will be given several statements regarding positional asphyxia and excited delirium. Please choose all of the statements that are correct.

(Multiple Response, 10 points, 1 attempt permitted)



3.5 Untitled Slide









5-101.01 TRUTHFULNESS (01/26/05) (11/15/13)

The integrity of police service is based on truthfulness. Officers shall not willfully or knowingly make an untruthful statement, verbally or written, or knowingly omit pertinent information pertaining to his/her official duty as a Minneapolis Police Officer.

applicable State and Federal law. All employees of the Minneapolis Police Department are required

MPD employees shall not willfully or knowingly make an untruthful statement or knowingly omit pertinent information in the presence of any supervisor, intended for the information of any supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation. (12/14/07)

supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation.

These requirements apply to any report, whether verbal or written, concerning official MPD business including, but not limited to, written reports, transmissions to MECC and officers via radio, telephone, pager, e-mail or MDC.

GOVERNMENT
EXHIBIT

45
21-cr-108 (PAM/TNL)

00005950





MINNEAPOLIS POLICE DEPARTMENT
OPERATIONS SECTION

NUMBER:
5-100
DATE:
18 ITAN: 2018

5-101.01 TRUTHFULNESS (01/26/05) (11/15/13)

The integrity of police service is based on truthfulness. Officers shall not willfully or knowingly make an untruthful statement, verbally or written, or knowingly omit pertinent information pertaining to his/her official duty as a Minneapolis Police Officer.

applicable State and Federal law. All employees of the Minneapolis Police Department are required

MPD employees shall not willfully or knowingly make an untruthful statement or knowingly omit pertinent information in the presence of any supervisor, intended for the information of any supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation. (12/14/07)

supervisor, or before any court or hearing. Officers shall not make any false statements to justify a criminal or traffic charge or seek to unlawfully influence the outcome of any investigation.

These requirements apply to any report, whether verbal or written, concerning official MPD business including, but not limited to, written reports, transmissions to MECC and officers via radio, telephone, pager, e-mail or MDC.

GOVERNMENT EXHIBIT 45 21-α-108 (PAM/TNL) 00005950